APPLICATION FOR ALCOHOLIC BEVERAGE CONTROL RETAIL LICENSE

It is not necessary to employ any person, agency or organization to assist you in filing this application. Beware of persons claiming to be able to assist you in securing action on your application. The payment of money or other thing of value for the use of influence, or promise of influence in obtaining a license is a violation of law and offenders will be prosecuted.

1. APPLICANT			
Name of applicant:	Trade name (DBA):		
Starjem Foods, LLC	Fresco By Scotto On The Go		
Premises street address:	City, State, Zip:		
114 Pearl Street aka 10 Hanover Square	New York, New York 10005		
County:	Telephone number (include area code):		
New York	none yet		
Between what streets:	Mailing address (if different than above):		
Hanover Square and Water Street			
E-mail address (if available):			
2. CONTACT			
Name:	✓ Attorney		
Robert V. Ferrari			
Office address:	•		
630 Third Avenue- 16th Floor			
City, State, Zip:	Telephone number (include area code):		
New York, New York 10017	(212) 972-7040		
E-mail address (if available):			
rvf@rvferrari.com			
3. For SEASONAL license only - beginning 8	ending months:		
4. LICENSE CLASS on premises liquor	CODE: 252		
(see sched	tule of fees)		
5. Check Number of ADDITIONAL BARS (if	any):		
6. TOTAL PAYMENT DUE: \$ 4,627.00			
7 5 1 17 11 15 CC C A November			
7a. Federal Tax Identification Number:			
7b. Worker's Compensation/Disability Benef	its Policy Number: Pending		
!OFFI	CE USE ONLY]		
[011]	or one out i		
Date filed:			
SERIAL #:	_		

08 FEB 13 PM 1: 49

HAS FIGURE BUREAU HAS FIGURE BUREAU MEGENAED

Section A Are there any local option restrictions in this area (Dry, Partially Dry)? ☐ Yes ☑ No 8. If YES, explain: 9. TO BE FILLED IN ONLY BY INDIVIDUAL OR PARTNERS **Date of Birth** Name of Individual/Partner Residence Citizenship Statutory Disqualification: Identify and explain as described on page II of Instructions. 10. TO BE FILLED IN ONLY BY CORPORATION OR LLC/LLP APPLICANTS New York a. State under what law applicant was organized: 3/12/2007 Date of organization. b. SUBMIT COPY OF FILING RECEIPT C. If applicant is a foreign entity, has a Certificate of Authority been obtained to do business in this state? ☐ YES □ NO d. If YES, date of certificate: Mailing address if different from premises address: e. List names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) f. Attach additional sheets if necessary. No. of Shares or Name of Principals Right Date Posidoneo

70 OI OWITE ISTUP	Diltii Date
/Member 30%	
/Member 30%	
/Member 30%	
10%	
* *	
age II of Instructions.	

Section A 11. RIGHT TO PREMISES a. By what right does the applicant have possession of the premises? Own ✓ Lease Sub-Lease Binding Contract to acquire the real property. Other (explain): b. Do the terms of the lease or other arrangement require payment by the applicant of any consideration based on a percentage of the receipts of the business? YEŞ ✓ NO (If YES, state percentage and give details on an attached page. c. Specify lease start date: July 27, 2007 and Lease Expiration Date: July 31, 2022 **INTERESTED PARTIES** Is any license under the Alcoholic Beverage Control Law now in effect for MYES ✓ NO the premises for which this application is filed? Name of current/previous licensee: None And License No.: b.

☐ YES

☐ YES

Nature of Interest

NO V

✓ NO

Date Acquired

Will any other business of any kind be carried on in said premises?

Does any person not identified herein, or if a corporation, LLC or LLP

applicant any person not an officer, director, or stockholder of such corporation, or member of LLC or LLP, or any other person, share, or will share on a percentage basis or in any way in the receipts, losses or deficiencies of the

If YES, state the names and address of such persons, the nature and percent

Address

If YES, state the name and addresses of the premises, the license number, the

Date the interest was acquired and the exact nature of the interest.

(If YES, provide details on an attached page.)

business, to any extent whatsoever?

of their share and date acquired.

Name

е.	Does the applicant or, if a partnership, any of the partners, or if a corporation any of the officers, directors or stockholders or if a limited liability company (LLC), or a limited liability partnership (LLP) have any interest, direct or indirect, in any other		
	premises or business where any alcoholic beverage is manufactured or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans?	✓ YES	□ NQ

See personal questionnaires of Rosanna Scotto, Marion Scotto, Elaina Scotto-Faucetta and Anthony Scotto, Jr.

EXCISE BOND UNDERWRITERS

1205362-5

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR 15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y.10038 PERMIT UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

New York State Liquor Authority November 1963

Bond Form L-9 Prescribed by

LIQUOR

BOND EXPIRES IN

BOND NUMBER

001--24

X-B12868---00

2010

Penal Sum of Bond

KNOW ALL MEN BY THESE PRESENTS, that we,

1.000.00

Plus Costs

Name of Applicant

Address of Place of Business

STARJEM FOODS LLC

114 PEARL STREET, A/K/A 10 HANOVER SQUARE

NEW YORK

NY 10005

In the county of NEW YORK

State of NEW YORK as Principal, and SEABOARD SURETY COMPANY

having an office and usual place of business at

233 BROADWAY NEW YORK

NY 10279

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this Standay of FEBRUARY

2008

FOODS

SEABOARD SURETY COMPANY

APPLICANT MUST SIGN HERE

Attorney-in-fact

CONDITIONS

- 1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
- 2. The aggregate liability of the surety on account of any and all defaults hereunder shall-in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
- 3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
- 4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
- 5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
- 6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
- 7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

1265362

SECTION A

APPLICATION FOR ALCOHOLIC BEVERAGE CONTROL RETAIL LICENSE

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. APPLICANT	Tell come (DDA):	
ame of applicant:	Trade name (DBA): Fresco By Scotto On The Go	
Starjem Foods, LLC	City, State, Zip:	
remises street address:		
114 Pearl Street aka 10 Hanover Square	New York, New York 10005 Telephone number (include area code):	
County:	i e	
New York	none yet Mailing address (if different than above):	
Between what streets:	Mailing address (if dillerent than above).	
Hanover Square and Water Street		
E-mail address <i>(if available)</i> :		
2. CONTACT		
Name:	☑Attorney □Representative □Contact Person	
Robert V. Ferrari		
Office address:		
630 Third Avenue- 16th Floor	- Lindude area code):	
City, State, Zip:	Telephone number (include area code):	
ity, State, 24p: New York, New York 10017 (212) 972-7040		
E-mail address (if available):		
rvf@rvferrari.com		
5. Check Number of ADDITIONAL BA	or CODE: 252 See schedule of fees) ARS (if any):	
	[OFFICE USE ONLY]	
Date filed:		
SERIAL #:		

Anthony M. Scotto, Jr. Name of Principals Residence Citizenship Date of Birth Date of Instructions. New York 3/12/2007 Submit Copy of Filling RECEIPT Date of organization: Submit Copy of Filling RECEIPT Date of organization: Submit Copy of Filling RECEIPT Date of organization: Submit Copy of Filling Receipt Date of Instructions.		Are there any	local option restric	tions in this	area (Dry, Partial	ly Dry)? □Ye	Section A es No
Anthony M. Scotto, Jr. Marians Scotto Residence Resi). T	O BE FILLED	IN ONLY BY INDIV	IDUAL OR P	ARTNERS		
Authority been obtained to do business in this state? List names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. Name of Principals Residence Citizenship List names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. Name of Principals Residence Citizenship LUSA Manager/Member Manager/Mem						ip Date	of Birth
A. State under what law applicant was organized: Date of organization: SUBMIT COPY OF FILING RECEIPT If applicant is a foreign entity, has a Certificate of Authority been obtained to do business in this state? d. If YES, date of certificate: e. Mailing address if different from premises address: f. List names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. No. of Shares or % of ownership Attach additional sheets if necessary. No. of Shares or % of ownership Birth Date USA Manager/Member 30% Anthony M. Scotto, Jr. Marion Scotto USA Manager/Member 30% USA Manager/Member 30% USA Manager/Member 30% USA Manager/Member 30% USA Member 10% US	Statut	ory Disqualif	cation: Identify and	explain as desc	ribed on page II of I	nstructions.	
Date of organization: SUBMIT COPY OF FILING RECEIPT If applicant is a foreign entity, has a Certificate of Authority been obtained to do business in this state? If YES, date of certificate: Mailing address if different from premises address: It ist names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. Name of Principals Residence Citizenship Title No. of Shares or % of ownership % of ownership and the ownership West of war of West of West of West ownership West of West ownership USA Manager/Member 30% USA Member 10% Statutory Disqualification: Identify and explain as described on page II of Instructions.				_		LICANTS	
Submit copy of Filing Receipt If applicant is a foreign entity, has a Certificate of Authority been obtained to do business in this state? If YES, date of certificate: If YES, date of	a. :	State under what la	w applicant was organized	. –			
If applicant is a foreign entity, has a Certificate of Authority been obtained to do business in this state? If YES, date of certificate: If YES, date of certificate: If Authority been obtained to do business in this state? If YES, date of certificate: If YES, date of ce					/12/2007		
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List names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. No. of Shares or % of ownership Title No. of Shares or % of ownership Anthony M. Scotto, Jr. Marion Scotto USA Manager/Member 30% USA Manager/Member 30% USA Manager/Member 30% USA Member 10% VSA Member 10% VSA Member * * Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share processed in the other four share	; .	If applicant is a fore Authority been obta	eign entity, has a Certificate ained to do business in this	e of state?	ſ	☐ YES [] NO
Elist names and address of Principals (Stockholders, Officers, Directors, LLC Members/Managers, LLP Partners) - Attach additional sheets if necessary. No. of Shares or % of ownership Title % of ownership Title % of ownership Statutory Disqualification: Identify and explain as described on page II of Instructions.	1 .	If YES, date of cer	tificate:				
Attach additional sheets if necessary. Name of Principals Residence Citizenship Title Wo fownership 30% USA Manager/Member 30% Marion Scotto, Jr. Marion Scotto USA Manager/Member 30% USA Manager/Member 30% USA Manager/Member 30% USA Member 10% Coastal To Go LLC * Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share proceeds and the other four s	e.	Mailing address if	different from premises add	lress: _			
Name of Principals Residence USA Manager/Member 30% USA Member 10% USA Member ** * Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share proceeds and the other	f.	Attach additional	sheets if necessary.			No. of Shares or	
Anthony M. Scotto, Jr. Marion Scotto Rosanna Scotto Coastal To Go LLC * Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share proceeds and the other four		_	Residence				
Marion Scotto Rosanna Scotto USA Member 10% USA Member * Statutory Disqualification: Identify and explain as described on page II of Instructions.						30%	
Rosanna Scotto USA Member 10% USA Member * USA Member * USA Member * *Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share proceeds and the other four s							
Coastal To Go LLC WSA Member * Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share pro Statutory Disqualification: Identify and explain as described on page II of Instructions.				USA	Member		-
* Annual earnings will be 5% of gross revenue before the other four share; upon sale he gets 20% of the net proceeds and the other four share pro Statutory Disqualification: Identify and explain as described on page II of Instructions.	Canata	IT. C. IIC					
NONE	* Annus	at earnings will be 5%	of gross revenue before the oth	ner four share; upon explain as des	sale he gets 20% of the net p cribed on page II of	proceeds and the othe Instructions.	r four share pro
			NONE				

STATEMENT OF AREA PLAN

	Applicants for on pre	mises and liquor store license	s must complete Se	ction D.
	ur premises within 200 feet of any OL, CHURCH or PLACE OF WOI	RSHIP?	☐ YES	✓ NO
location	submit a BLOCK PLOT DIAGRAI n of any school, church or place of int premises (8½" x 11").			
Indicate	e the distance in feet from the prop	posed premises. Attach additional shee	ets if necessary.	
1.	Name of church/school:			
	Address:			
	Distance:		· · · · · · · · · · · · · · · · · · ·	
2.	Name of church/school:			
	Address:		44	
	Distance:	La La Applica d'Albertonia		
3.	Name of church/school:			
	Address:			
	Distance:			
				SECTION E
	LAN	DLORD IDENTIFICATION INFO	ORMATION	
			,	
1.	Name of Landlord:	Ten Hanover LLC	•	
2.	Landlord address:	c/o The Witkoff Group LLC 220	East 42nd Street, New Y	ork, New York 10017
3.	Landlord's telephone number:	(203) 552-9167		1 3000000
4.	Landlord Principals:			
Name Steven	Add Witkoff 220 East 42nd Street,	ress New York New York 10017		
- COUNTRY OF THE PROPERTY OF T	TT ACTION AND ADMIC TARREST OF COLUMN	Tork, New York 1001,		
	,			
5(a).	Are any persons listed on th Licensed under the ABC Lav	is form currently or previously	☐ YES	□ NO
(b).	If YES, list names and licens	se numbers:	Unknown - Landlor	rd refused information.

500 FOOT RULE STATEMENT

Applicants for on premises licenses must complete Section C. (Not required for on premises beer or wine application)
In the public interest, the provisions of Section 64.7 and 64-a.7 of the ABC Law require the Authority to consult with the municipality or community board prior to granting a license for ANY ON-PREMISES LIQUOR LICENSE for any premises within five hundred feet of three or more similarly licensed premises. The Authority is further required to conduct a public hearing, upon notice to the applicant and the municipality or the community board.
The proposed premises:
Check the appropriate box
Premises is not within a 500 foot radius of three or more establishments selling liquor for on-premises consumption.
Premises is within a 500 foot radius of three or more establishments selling liquor for on-premises consumption. If so, you must complete the written statement below, unless the premises has been continuously licensed on or prior to November 1, 1993.
IMPORTANT:
If premises is within a 500 foot radius of 3 or more on-premise liquor licenses and have not been continuously licensed since 11/1/93 you must, <u>SUBMIT A WRITTEN STATEMENT EXPLAINING IN DETAIL WHY YOU BELIEVE ISSUANCE OF THIS LICENSE WOULD BE IN THE PUBLIC INTEREST.</u>
See annexed rider.

1205362

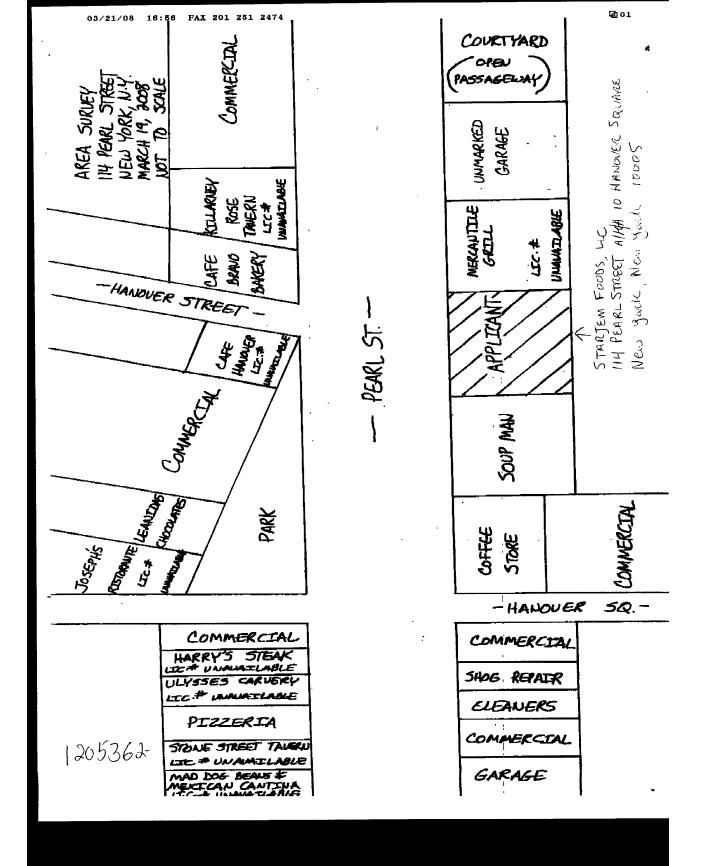
RIDER TO SECTION C

STATEMENT OF PUBLIC CONVENIENCE AND ADVANTAGE AND THE PUBLIC INTEREST

Public convenience and advantage and the public interest will be served by granting this application for an on-premises liquor license, which conclusion is supported by the following factors:

- (a) The Premises will provide employment to several persons, a number of whom will be from the neighborhood in which the Premises are located. It is certainly in the public interest for the City and State (and especially for the neighborhood) to encourage prospective employers such as the Applicant to open for business here and thereby aid in reducing the present level of unemployment in New York City.
- (b) It is anticipated that the Applicant's Restaurant business will produce substantial sales tax revenue for the City and State of New York.
- (c) The New York City Planning Commission has heretofore voted to permit a Use Group 6 business (such as a restaurant), to lawfully operate at the Premises. Inasmuch as the Applicant intends to operate a restaurant business at the Premises, such intended use is, therefore, ipso facto, in the public interest.
- (d) The appearance of the Applicant's sparkling new establishment on the block can only benefit the service and retail businesses in the surrounding neighborhood by attracting more people to the block.
- (f) This application has been approved by Community Board No 1 (Manhattan). In view of downtown Manhattan's ongoing efforts to recover from the lingering impacts of the 9/11 tragedy, the Applicant's proposed restaurant will certainly further that end. In this regard, the head of the local organization devoted to promoting the revival of the downtown Manhattan business district vigorously supported the Applicant at the meeting of Community Board 1 which considered and approved this application.

In light of the foregoing, public convenience and advantage and the public interest will be served by granting this application.



ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040 TELECOPIER (212) 922-1939 E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

March 31, 2008

New York State Liquor Authority 317 Lenox Avenue, 4th Floor New York, New York 10027 Attention: Linda DeFazio-Ahmed. Examiner

Re: Starjem Foods, LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, NY 10005 Serial No: 1205362

Dear Ms. DeFazio-Ahmed,

I spoke to Mr. Sikowsky last Friday he said he would be calendering the 500' hearing in this matter. He asked for an explanation to be made part of the file as to why the application was filed incorrectly as to the 500' rule.

I spoke to the clients representative who looked around the neighborhood and the only excuse she had was her perception of distances were bad. In any event she acknowledges now that there are at least 3 on-premises liquor licenses within 500' of the premises.

Robert V. Ferrari

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017 (212) 972-7040 TELECOPIER (212) 922-1939 E-MAIL: rvf@rvferrari.com

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ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017 (212) 972-7040 TELECOPIER (212) 922-1939 E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

April 21, 2008

BY HAND State Liquor Authority 317 Lenox Avenue New York, New York 10027 Attention: Michael Sakovsky

Deputy Commissioner

Re: Starjem Foods LLC (hereinafter "Starjem")

114 Pearl Street a/k/a 10 Hanover Street New York, New York (the "Premises")

Serial No: NEW OP 1205362

Dear Commissioner Sakovsky:

I am the attorney for Stargem which filed an application for an on- premises liquor license on February 13, 2008.

Prior to filing this application, my client's principal informed me that the Premises were not within 500 feet of three or more similarly licensed establishments and I indicated such on Section C to the application.

Subsequent to filing, I discovered that such was not the case and proceeded to transmit a corrected Section C to Ms. Linda DeFazio-Ahmed, the investigator assigned to this application. I, thereafter, telephoned Ms. DeFazio-Ahmed to request that she have her office calendar a 500 foot hearing for this application; and she responded by advising me that I would have to submit that request for you.

On or about March 21,2008, we spoke by telephone regarding this matter and you indicated that that I should note such request in a letter, whereupon, this application would be calendared for a 500 foot hearing. I transmitted such letter to Ms. DeFazio-Ahmed on March 21, 2008. To date, I have not received written notice of the date for such 500 foot hearing.

It would appreciated if the 500 foot hearing could be calendared at your earliest convenience.

Robert V. Ferrari



STATE OF NEW YORK EXECUTIVE DEPARTMENT DIVISION OF ALCOHOLIC BEVERAGE CONTROL STATE LIQUOR AUTHORITY

www.abc.state.ny.us

David A. Paterson Governor

317 Lenox Avenue New York, New York 10027

Chairman Daniel B. Boyle

Commissioner Noreen Healey

500 FOOT HEARINGS

Serial Number:

NEW OP 1205362

Applicant Name:

STARJEM FOODS, LLC

Address:

114 PEARL STREET

a/k/a 10 HANOVER SQUARE NEW YORK, NY 10005

PLEASE TAKE NOTICE that a hearing in connection with the above captioned application for a retail on-premises liquor license will be held on 5/13/2008 at 11:00 a.m. at the State Liquor Authority offices located at 317 LENOX AVENUE NEW YORK, NY 10027-4TH FLOOR HEARING BUREAU.

This hearing is being held because the applied for premises are in a municipality with a population of 20,000 or more people and it appears that there are already 3 or more retail on-premises liquor licensees located within 500 feet of the applied for premises.

PLEASE TAKE FURTHER NOTICE that the applicant and/or its attorney must be physically present at the hearing to be held on 5/13/2008. If the applicant or it's attorney does not physically appear and anyone else appears in opposition to this application, the Authority will presume that the applicant is unable to demonstrate that issuance of the applied for license is in the public interest.

The hearing will be conducted by an employee of the State Liquor Authority. The hearing will be tape recorded and the tape of the hearing will be made available to the Members of the Authority. All persons wishing to testify in favor of or in opposition to the application will be permitted to testify after they are placed under oath. No cross-examination of any witness will be permitted, however a witness may be asked questions by the State Liquor Authority employee conducting the hearing. If any person in opposition to this application wishes to submit written testimony or other evidence in lieu of (or in addition to) oral testimony, that person may do so by delivering the written testimony or other material to the State Liquor Authority no later than 3:00 p.m. on 5/20/2008 Any material received after that date will not be considered. A copy of any material sent to the State Liquor Authority should be directed to HEARING BUREAU-4TH FLOOR at the following address 317 LENOX AVENUE and must also be delivered to the applicant or it's representative on or before 3:00 p.m. on 5/20/2008 at the following address ROBERT V. FERRARI 630 3RD AVE. 16TH FLOOR NEW YORK, NY 10017. The applicant or it's representative may respond in writing to any written submissions it receives provided that such written response is received at the State Liquor Authority (with a copy to the Municipality/NYC Community Board) no later than 3:00 p.m. on 5/22/2008. Any material received after that date will not be considered.

Serial Number: *

After all oral testimony has been presented, the Authority employee conducting the hearing will permit the applicant to provide additional evidence in written form only provided that such written evidence is delivered to the State Liquor Authority no later than 3:00 p.m. on 5/20/2008. Any material received after that date will not be considered. A copy of any material sent to the State Liquor Authority must also be sent to the Municipality/NYC Community Board at the address shown at the bottom of this notice. The Municipality/NYC Community Board may respond in writing provided that it delivers it's response to the State Liquor Authority (with a copy to the applicant or its attorney) no later than 3:00 p.m. on 5/22/2008. Any material received after that date will not be considered.

PLEASE TAKE FURTHER NOTICE that on 5/22/2008 the record in this hearing will be closed and the matter will be presented to the Members of the State Liquor Authority at a regular meeting for final determination. At the meeting of the Members of the State Liquor Authority no further testimony, evidence or other material will be accepted and under no circumstances will anyone be permitted to speak.

The steps and times outlined above will be strictly adhered to.

PLEASE TAKE FURTHER NOTICE that no additional notices of any kind will be sent when this matter is presented to the Members of the Authority.

DATED: 4/23/2008

STARJEM FOODS, LLC APPLICANT

ROBERT V. FERRARI APPLICANTS REPRESENTATIVE

COMM BD # 1 49-51 CHAMBERS ST. NEW YORK, NY 10123 NEW YORK CITY COMMUNITY BOARD

FOR FURTHER INFORMATION

CONTACT LICENSING INFORMATION AT(212) 961-8385 OR (212) 961-8386

MEMORANDUM NEW YORK STATE LIQUOR AUTHORITY

Hearing Bureau 317 Lenox Avenue New York, New York 10027

TO:

License Bureau

FROM:

Raymond Di Luglio—Administrative Law Judge

DATE:

May 23, 2008

SUBJECT:

500' Hearing

Held May 13, 2008 Calendar # 2008-143 New OP 1205362

Applicant: Starjem Foods, LLC

114 Pearl St.

a/ka/ 10 Hanover Sq. New York, NY 10005

A 500 Foot Hearing, on notice to the applicant and Manhattan Community Board No. 1, was held on May 13, 2008, pursuant to Sections 64 (7) (f) and 64-a 7 (d) of the ABC law. Pursuant thereto the applicant was afforded an opportunity to demonstrate that the granting of an on-premise liquor license would be in the public interest; and the Community Board afforded an opportunity to demonstrate opposition to the granting of said license as not in the public interest.

Richard H. Byrnes, Esq. appeared on behalf of the applicant.

No one appeared on behalf of Manhattan Community Board No. 1.

Mr. Byrnes stated that the granting of this license is in the public interest, in part, because numerous people from the neighborhood will be employed; tax revenue for the City will be generated; and the area has been approved for restaurants by the NY City planning board. He stated that the Community Board held a meeting on this matter and approved the issuance of a license.

ESTABLISHMENT QUESTIONNAIRE

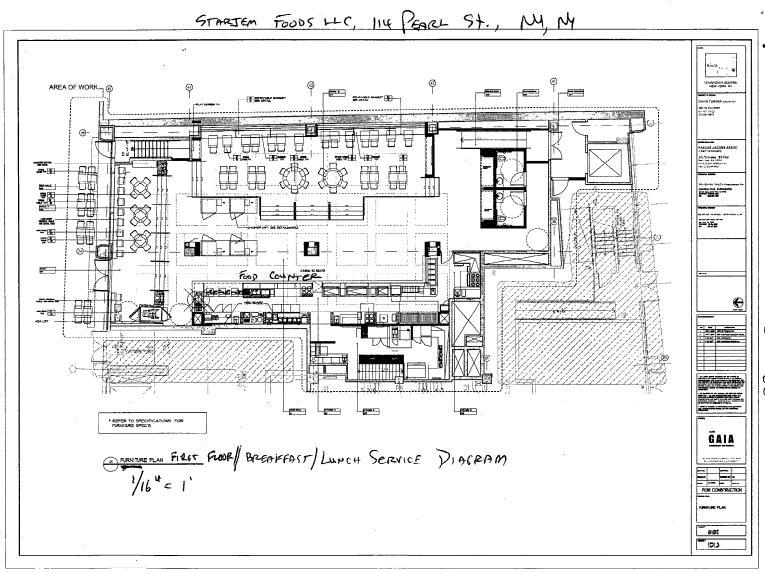
	All applicants must complete Section	on G.	
	IGHBORHOOD: pe of neighborhood:	✓ Residenti✓ Business✓ Shopping	
	EMISES (exterior): Type of building and number of floors: (Example: Detached, multi unit, shopping mall, etc.)	detached high-ri	se apartment building
b.	Has premises been known by any other address? If YES, please specify:	YES See premises stro	NO eet address in item 1
C.	Has premises been previously licensed for the sale of alcoholic beverages?	☐ YES	☑ NO
d.	What was prior use of premises:	Vacant	
e.	Any outside area or sidewalk café used for the sale or consumption of alcoholic beverages? (includes roof & yard) If YES, describe and show on diagram:	✓ YES Sidewalk cafe.	
f.	If applying for an on-premises license does premises have a valid CERTIFICATE OF OCCUPANCY and ALL appropriate permits?	✓ YES	NO NO
	SUBMIT A COPY OF THE CERTIFICATE OF OCCUPANCY OR A LETTER FROM MUNICIPALITY STATING NONE IS NEEDED.		
g.	Are the premises to be licensed divided in any way, by a public or private passageway, etc., over which the applicant does not have exclusive possession and control? If YES, describe:	YES	☑ NO
3. PR	EMISES (Interior):		 •
a.	On what floor(s) are the premises to be located:	First Floor and	
	How many room(s) on each floor?		oms,basement-2 rooms
b.		Stairway	Basement-Storage and Kitche
C.	If more than one floor, what is the access between floors?		
d.	How many bathrooms? 4	4	
e.	Location of bathrooms? (include on diagram)	2 on first floor,	2 in basement

Esta	blishment Questionnaire		Section G
f.	What is the maximum number of persons that can legally occupy the premises?	175	
g.	Number of tables? During Breakfast/Lu	nch service-27, during	dinner service - 35
h.	Number of seats at tables?	during breakfast/lun	ach - 84, during dinner - 132
i.	Is the interior view unobstructed throughout?	Yes	
	If not, state reason:		
. j.	Any openings to other parts of the building? If YES, describe:	✓ YES From basement of p area of basement of	
4. BA	RS:		
a.	How many *stand-up bars are located on the premises?	one	
b.	How many *service bars*?	None	
c.	Describe all bars (length, shape and location):	Straight 26'	<u> </u>
d.	Any food counters? If YES, describe:		□ NO nch - bar becomes food counter
٠	*See instructions, page II for definition of stand-up and service bars.	during dinner servi	ce it converts to public bar
5. KI T a.	TCHEN: Does premises have a kitchen or food preparation area? (If any, show on diagram).	✓ YES	□ NO
b.	Is food available for sale?	✓ YES	□ NO
	If yes, describe type of food and SUBMIT A MENU .	Italian	
6. HC			
a.	Type of Hotel:	☐ Transient ☐ Apartment ☐ Summer	·
b.	Is there a restaurant in the building(s) housing the proposed hotel?	YES	□ NO
C.	How many floors?		
d.	How many rooms?		
_	How many mini hara?		

PROPOSED METHOD OF OPERATION

All applicants for a license to sell alcoholic beverages must complete Section H.

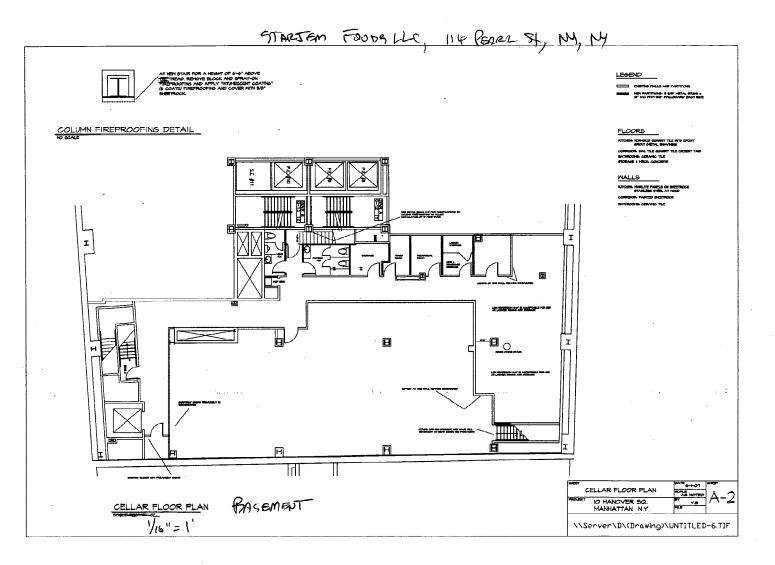
YES days per	□ NO ☑ NO week 6am-11:30pm
days per	week 6am-11:30pm
YES	☑ NO
anaged	
YES	☑ NO
YES	☑ NO
	YES

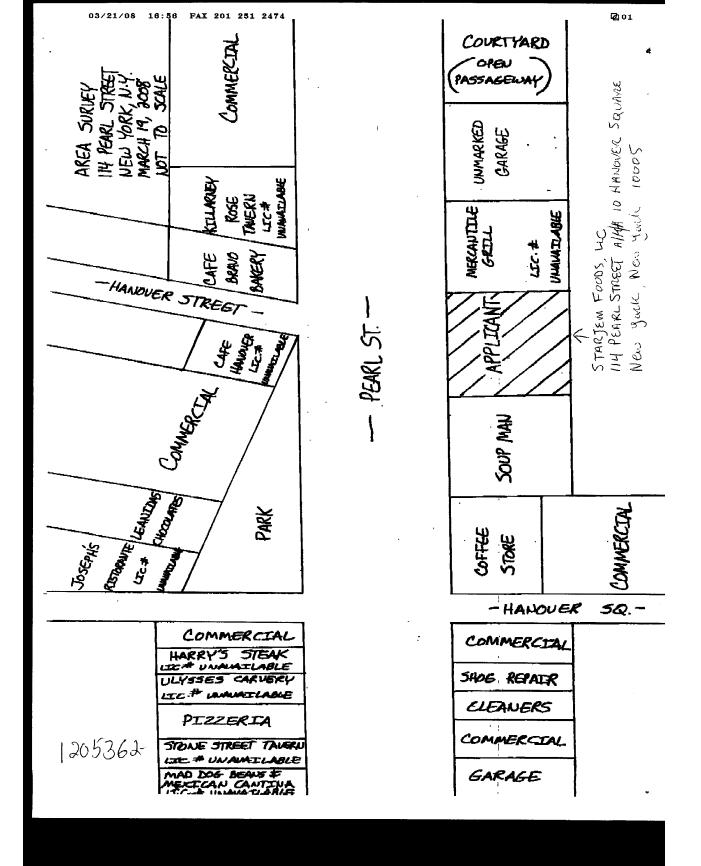


ANEACH WORLD

ANEACH WORLD

THE TENER FIRST FLOOR | DIRECT Services Director





LIST OF EXPENSES FOR THIS VENTURE

		All applicants must complete	Section B
Expense	e Item (Actual o	r Estimated):	
1	Real property		\$
2.	Purchase/con	tract price (submit copy of contract)	\$
3.	Security depo	sit	\$. Letter of credit
4.	Operating cap	oital	\$
5.	Miscellaneous (include Attori	s expenses ney/Representative fee)	\$311,000
6.	SLA fees		\$
7.	First month's	rent and any paid to date	\$
8.	Renovations		\$1,850,000
9.	Other	·	\$530,000
10.	Total Cash \$	2,500,000 (See Insti	ructions, Page IV, Section B for required verifications)
-	of deferred moni	TAIL HOW DECEDDED.	es, etc. Attach copies of EACH source
12.	TOTAL COS	T \$_2,800,000	
NOTE:		in items 1 through 9 must total the are in items 10 and 11 must total the am	
IMPOR		bmit any and all records, documents a u in explaining the source of monies a	and affidavits that you feel may assist s per instruction sheet.
List ba	nk account n	umbers from which "total cash" will	derive.
List ler	nders and am	ounts (to be) loaned from which "to	tal deferred" will derive.
Dollar(s) Amount	Type of Investment (Accounts, Loans, Gifts, Asset Sales, etc.)	Source of Funds Identify by Name – Lender, Giftor, Asset, Sales, Etc. – Provide Personal Questionnaires
\$2,500,00	····	Investment	Richard T. Fields
300,00	0	Loan	North Fork Bank - Line of Credit

1205362-

CERTIFICATE OF FORMATION
OF
COASTAL TO GO, LLC

State of Delaware Secretary of State Division of Corporations Delivered 01:59 PM 06/07/2007 FILED 01:45 PM 06/07/2007 SRV 070683772 - 4366191 FILE

This Certificate of Formation of Coastal To Go, LLC (the "LLC"), dated as of June 7, 2007, is being duly executed and filed by Angela M. Amaru, as an authorized person, to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. §18-101, et.seq.).

FIRST: The name of the limited liability company formed hereby is Coastal To Go, LLC.

SECOND: The address of the registered office of the LLC in the State of Delaware is c/o National Corporate Research, Ltd., 615 South DuPont Highway, Dover, DE, County of Kent, 19901.

THIRD: The name and address of the registered agent for service of process on the LLC in the State of Delaware is National Corporate Research, Ltd., 615 South DuPont Highway, Dover, DE, County of Kent, 19901.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation as of the date first above written.

/s/ Angela M. Amaru Angela M. Amaru Authorized Person

sevelopment

Mr. Fields holds (or has held) positions at the following entities:

Name	CSTL Holdings, LLC	Ho12.~9 C
Address	c/o 1 East 57 th Street	- FUR
	New York, New York 10022	speciol Turpose
Telephone		126'5
Position	Managing Member	
Date to Present	February 21, 2003	

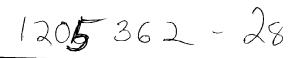
Name	Wyoming Land and Cattle, LLC Nocse
Address	c/o 1 East 57 th Street
	New York, New York 10022
Telephone	
Position	Managing Member
Date to Present	Approximately January 1, 2005 - Present

Name	Coastal Development, LLC PROJECT
Address	c/o 1 East 57 th Street
	New York, New York 10022
Telephone	
Position	Managing Member
Date to Present	Approximately October 15, 1999 - Present

Name	Seven Arrows Investment & Development Corp.			
Address	c/o 1 East 57th Street			
Telephone	New York, New York 10022			
Position				
Date to Present	Approximately July, 1994 – October 15, 1999			
	*company ceased operations			

Name	Power Plant Entertainment, LI	Power Plant Entertainment, LLC			
Address	601 East Pratt St. Baltimore, Maryland 21202				
Telephone		Sevel opment			
Position	N/A – Business Manager				
Date to Present	2002 to Present				

SECTION C
500 FOOT RULE STATEMENT
Applicants for on premises licenses must complete Section C. (Not required for on premises beer or wine application)
In the public interest, the provisions of Section 64.7 and 64-a.7 of the ABC Law require the Authority consult with the municipality or community board prior to granting a license for ANY ON-PREMISE LIQUOR LICENSE for any premises within five hundred feet of three or more similarly license premises. The Authority is further required to conduct a public hearing, upon notice to the applicant and the municipality or the community board.
The proposed premises:
Check the appropriate box
Premises is not within a 500 foot radius of three or more establishments selling liquor for on-premises consumption. Premises is within a 500 foot radius of three or more establishments selling liquor for on-premises consumption. If so, you must complete the written statement below, unless the premises has been continuously licensed on or prior to November 1, 1993.
IMPORTANT:
If premises is within a 500 foot radius of 3 or more on-premise liquor licenses and have not been continuously licensed since 11/1/93 you must, <u>SUBMIT A WRITTEN STATEMENT EXPLAINING IN DETAIL WHY YOU BELIEVE ISSUANCE OF THIS LICENSE WOULD BE IN THE PUBLIC INTEREST.</u>
,



LIST OF EXPENSES FOR THIS VENTURE

		All applicants must complete	Secti	ion B
Expen	se Item (A	ctual or Estimated):	0000	0.11 <u>D</u>
1.	Real pro	operty	\$	n/a
2.	Purchas	se/contract price (submit copy of contract)	\$	n/a
3.		deposit	\$ \$	Letter of credit
4.	Operatir	ng capital	\$_ \$	75,706
5.	Miscella (include	neous expenses Attorney/Representative fee)	\$_ \$_	311,000
6.	SLA fee	,	\$	4,627
7.	First mo	nth's rent and any paid to date	\$_ \$	28,667
8.	Renovat		Ψ_ \$	1,850,000
9.	Other		Ψ_ \$	530,000
10.	Total Ca	sh \$_2,500,000 (See Instr	Ψ Justiana I	Page IV, Section B for required verifications)
-		erred includes loans, mortgages, lines of credit, noted in monies) IN DETAIL HOW DEFERRED:		Attack copies of EACH source
12.	TOTAL	COST \$_2,800,000		
NOTE:	The amo	ounts <i>in items 1 through 9</i> must total the amounts <i>in items 10 and 11</i> must total the amo	ount r	eflected in item 12.
MPOR	TANT -	Submit any and all records, documents ar you in explaining the source of monies as	nd affi	davita that you follow
ist ba	nk accou	nt numbers from which "total cash" will d	erive.	a a dion one of
ist len	ders and	amounts (to be) loaned from which "total	l defe	rred" will derive.
ollar(s)	Amount	Type of Investment (Accounts, Loans, Gifts, Asset Sales, etc.)	ider Sales,	Source of Funds ntify by Name – Lender, Giftor, Asset, Etc. – Provide Personal Questionnaires
300,000		Loan		North Fork Bank - Line of Credit
				Dine of Cledit
tach add	ditional shee	et if necessary.		

PERSONAL QUESTIONNAIRE

 All <u>principals</u> to the license ap Answer all questions below. NAME OF APPLICA	•	,		uplicate blank forms as nece ditional sheets if more space	•
1. Statement of Iden	, -				
Print YOUR name:				Date of birth:	
Rosanna Scotto					_
Residence street address of abo	ve:	•		Social Security number:	
Country				E-mail address:	
County:				E-mail address.	
City, State, Zip:		,		Telephone number (reside	ence):
U.S. citizen?	f NOT U.S. citizen - co	untry of citizenship:		If Alien, registration # or Vi	isa type:
✓ YES □ NO					
List any other names that you ha	ive been known by (inc	cluding maiden name):			
Height 5'4"	Hair Color	Brown	Marital Statu	s Married	
Sex Male Female	Eye color _			ne Louis Ruggiero	
Weight 125lbs				cial Security #:	
					
2. Residences for th	e past TEN yea	rs. (If more space is require	ed, attach add	itional sheets):	
Addross	,			From (month/year) To	(month/year)
3. Your occupation f	for the past TEN	years. (If more space is	required, atta	ch additional sheets).	
, , ,	oloyer	Address	,	Type of Business News Station	Position
3/1986 to date	News 205 I	East 67th Street, NY, NY			Anchor
		· · · · · · · · · · · · · · · · · · ·		·	
· · · · · · · · · · · · · · · · · · ·					
4. Position (or interest	t) you will hold in t	he license application (check each):	
President		Director		Manager	
☐ Vice President☐ Secretary		Stockholder Partner		Lender Donor	
Treasurer	H	General Partner		Guarantor	
Chairman		Limited Partner		LLC Manager	
Officer		Sole Proprietor		✓ LLC Member	
OTHER					

5. LICENSE HISTORY / AFFILIATIONS		Section M
If you are an applicant (i.e.: proprietor, partner, stockholder, officer or director) or applicant's spouse, will you continue your present occupation or business?	✓ YES	□ NO
If YES, list hours you will devote to business sought to be licensed:		
Will you take an active part in the operation of the business to be licensed?	☐ YES	 ✓ NO
If YES, explain nature of activity (hours, day, week):		
Do you have any interest, direct or indirect, in any premises currently licensed by the Liquor Authority or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? If YES, provide information below:	✓ YES	□ ио
Business Name Business Address Date Interest Began Starjem LLC 40 East 52nd Street, New York, New York 10022 1999		or License No. 027037
Starjem Restaurant Inc 34 East 52nd Street, New York, New York 10022 1993	10	027039
		#*P*
Other than as itemized in the above, have you ever applied in New York State, or Anywhere for a license or permit to traffic in alcoholic beverages, including Any application as a partnership or corporation in which you are/were a principal? If YES, provide information below:	☐ YES	☑ ио
Name of applicant Address of premises Date of filing Lic	ense No.	Disposition
Has a license or permit listed above been REVOKED, CANCELED Or otherwise Involuntarily Terminated?	YES	✓ NO
If YES, state action and date of action, and give details:		
Are you a police commissioner, other police official, subordinate of any police Department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?	☐ YES	☑ NO
If YES, provide details?		٠.

6.	CONVICTION RECORD & PENDING CRIMINAL CASES	<u> </u>	Section M
(a)	Have you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) been convicted of a crime addressed by the provisions of Section 126 of the ABC Law (see instructions for statutory disqualification) which would forbid a person to traffic in alcoholic beverages?	☐ YES	· NO
	If YES, supply details (attach additional pages as necessary):		
		-	
	· · · · · · · · · · · · · · · · · · ·		
			· · ·
(b)	Have you or your spouse (or any officer, director, shareholder or partner Listed in this application or the spouse of such person) ever been CONVICTED (including pleas of guilty or suspended sentences of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?	☐ YES	☑ NO
(c)	If YES, attach a Certificate of Disposition by the court clerk for each case And a Certificate of Relief from disabilities if available and submit an Affidavit explaining all details. If you have reported all convictions to this Authority and were subsequently approved for a license, check here:	Approved:	
(d)	Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) – including driving while intoxicated or impaired?	☐ YES	☑ NO
(e)	IF YES, PROVIDE COPY OF ACCUSATORY INSTRUMENT.		
(f)	If you are an applicant (i.e. proprietor, partner, stockholder, officer or Director), would any of the above questions require a YES answer if asked of your spouse?	YES	☑ NO
7.	INFORMATION CONCERNING AVAILABILITY OF PREMISES		
Exc	plain how you became aware of the availability of the proposed premises.		
	ough my mother Marion Scotto.		

IMPORTANT: Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant as per instruction sheet.

State TOTAL AMOUNT OF MON applicant:	NEY you are providing the	\$	0
Type of Investment (Investment Loan, Contract Debt)	Type of Investment Dollar (\$) Amount		Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)
			-
	signer or putting up something of value as c	ollat	eral.
Identify Co-Signer or Collateral		ldei	ntify Loan/Describe Collateral

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after the receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Signature of Applicant

Date

PERSONAL QUESTIONNAIRE

 All <u>principals</u> to the license applicati Answer all questions below. NAME OF APPLICANT	on must complete this questionnaire in full. Starjem Foods LLC		uplicate blank forms as neces Iditional sheets if more space	
Statement of Identification	•			
Print YOUR name:	`	•	Date of birth:	
Elaina Scotto-Faucetta				
Residence street address of above:			Social Security number:	
County:			E-mail address:	
City, State, Zip:		,	Telephone number (resider	ice):
U.S. citizen? If NOT	U.S. citizen - country of citizenship:		If Alien, registration # or Vis	sa type:
✓ YES □ NO				
List any other names that you have be Elaina Scotto	en known by (including maiden name):			
eleli			3.5	
Height 5'5"	Hair Color Brown	Marital Statu		
Sex Male Female	Eye color Brown	Spouse Name Daniel Faucetta Spouses Social Security #:		
Weight 120lbs		Spouses So	cial Security #:	
2. Residences for the pa	st TEN years. (If more space is require	ed, attach add	itional sheets):	
Address			From (month/vear) To (r	nonth/vear)
-	Marie Company of the			
	- 1			
3. Your occupation for the	ne past TEN years. (If more space is	required, atta	ch additional sheets).	
From/To (month/year) Employer 1999 to date Starjem LLC	Address 40 East 52nd Street, New York, Ne	w York 1002	Type of Business 22 Restaurant	Position Co-Manager
11/1993 to date Starjem Res	taurant Inc 34 East 52nd Street, NY,	NY 10022	Restaurant	Co-Manager
•				
4. Position (or interest) you	ı will hold in the license application (check each):	
President	Director		Manager	
Vice President	Stockholder		Lender	
Secretary Treasurer	Partner General Partner		☐ Donor ☐ Guarantor	
Chairman	Limited Partner		✓ LLC Manager	
Officer	Sole Proprietor		✓ LLC Member	
OTHER				

5. LICENSE HISTORY / AFFILIATIONS		Section M
If you are an applicant (i.e.: proprietor, partner, stockholder, officer or director) or applicant's spouse, will you continue your present occupation or business?	✓ YES	□ NO
If YES, list hours you will devote to business sought to be licensed:	10 hours	
Will you take an active part in the operation of the business to be licensed?	✓ YES	□ NO
If YES, explain nature of activity (hours, day, week): Marketing.		
	-	
Do you have any interest, direct or indirect, in any premises currently licensed by the Liquor Authority or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans?	☑ YES	□ NO
If YES, provide information below:		
Business Name Business Address Date Interest Began Starjem LLC 40 East 52nd Street, New York, New York 10022 1999	Liqui 1027	or License No. 1037
Starjem Restaurant Inc 34 East 52nd Street, New York, New York 10022 1993	1027	7039
Other than as itemized in the above, have you ever applied in New York State, or Anywhere for a license or permit to traffic in alcoholic beverages, including Any application as a partnership or corporation in which you are/were a principal?	☐ YES	[7] NO
If YES, provide information below:	[] 1L3	₽ NO
	cense No.	Disposition
Has a license or permit listed above been REVOKED, CANCELED Or otherwise Involuntarily Terminated?	YES	☑ NO
If YES, state action and date of action, and give details:		•
Are you a police commissioner, other police official, subordinate of any police Department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?	☐ YES	 NO
If YES, provide details?		
		*
·		

6.	CONVICTION RECORD & PENDING CRIMINAL CASES		Section M
(a)	Have you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) been convicted of a crime addressed by the provisions of Section 126 of the ABC Law (see instructions for statutory disqualification) which would forbid a person to traffic in alcoholic beverages? If YES, supply details (attach additional pages as necessary):	☐ YES	☑ NO
v	·		
	2		
	· · · · · · · · · · · · · · · · · · ·		
	Have you or your spouse (or any officer, director, shareholder or partner Listed in this application or the spouse of such person) ever been CONVICTED (including pleas of guilty or suspended sentences of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?	☐ YES	☑ NO
(c)	If YES, attach a Certificate of Disposition by the court clerk for each case And a Certificate of Relief from disabilities if available and submit an Affidavit explaining all details. If you have reported all convictions to this Authority and were subsequently approved for a license, check here:	Approved:	
	Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) – including driving while intoxicated or impaired?	☐ YES	☑ NO
(e)	IF YES, PROVIDE COPY OF ACCUSATORY INSTRUMENT.		
(f)	If you are an applicant (i.e. proprietor, partner, stockholder, officer or Director), would any of the above questions require a YES answer if asked of your spouse?	☐ YES	☑ NO
7. ·	INFORMATION CONCERNING AVAILABILITY OF PREMISES		
Explain how you became aware of the availability of the proposed premises.			
Real estate broker.			

IMPORTANT: Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant as per instruction sheet.						
State TOTAL AMO applicant:	OUNT OF MON	EY you are providing the	he \$	·	0	
Type of Inve (Investment Loan, C	stment Contract Debt)	Type of Investment Dolla	ar (\$) Amount		Source of Funds ccounts, Loans, Gifts, Asset Sales, etc.) nter identification numbers for accounts)	
If you are guaranteed		signer or putting up somethi	•		il. y Loan/Describe Collateral	
					7	
				·		
statement or misi	representatio				State Liquor Authority and a false of the application or revocation of	
will notify the Aut of the license, I	hority by regional will notify the	stered or certified mail Authority similarly w	within 48 hours ithin 10 days.	s oi I u	prior to the receipt of the license, I r if change occurs after the receipt inderstand that failure to give the result in revocation of the license.	
1		_			. /	

PERSONAL QUESTIONNAIRE

 All <u>principals</u> to the license application must complete this questionnaire in full. Answer all questions below. Make duplicate blank forms as necessary. Attach additional sheets if more space is needed. NAME OF APPLICANT: Starjem Foods LLC						
1. Statement of Ide	ntification					
Print YOUR name:				Date of birth:		
Marion Scotto						
Residence street address of a	bove:			Social Security number:		
County:				E-mail address:		
City, State, Zip:				Telephone number (resid	dence):	
U.S. citizen?	If NOT U.S. citizen - country	of citizenship:		If Alien, registration # or	Visa tyne:	
YES NO	ii NOT 0.0. ciazen - country	or citizenship.		Training regionation in or	viou typo.	
List any other names that you	l have been known by (includin	g maiden name):			· · · · · · · · · · · · · · · · · · ·	
Marion Anastasio						
71411				2.7		
Height	Hair Color Blo		Marital Statu	al Status Married		
Sex Male Female	Eye color Brow			Anthony Scotto		
Weight 135lbs			Spouses Social Security #:			
2. Residences for t	the past TEN years.	(If more space is require	ed, attach addi	itional sheets):		
Address				From (month/year) To	(month/year)	
				, , , , , , , , , , , , , , , , , , , ,		
3. Your occupation	for the past TEN ye	ars. (If more space is	required, atta	ch additional sheets).		
From/To (month/year) Er	mployer LC 40 East 52nd Street, N	Address	·	Type of Business Restaurant	Position Manager	
	n Restaurant Inc 34 East			Restaurant	Manager	
		, ,				
4. Position (or intere	est) you will hold in the li	cense application (check each	١٠		
President		ector	5.70 GR 0 GOT	<i>∏</i> Manager		
Vice President		ckholder		Lender		
Secretary		rtner _		Donor		
Treasurer		neral Partner		☐ Guarantor ✓ LLC Manager		
☐ Chairman ☐ Officer		nited Partner le Proprietor		LLC Manager		
OTHER						
— ···—·· <u>——</u>						

5. LICENSE HISTORY / AFFILIATIONS		Section M
If you are an applicant (i.e.: proprietor, partner, stockholder, officer or director) or applicant's spouse, will you continue your present occupation or business?	✓ YES	□ NO
If YES, list hours you will devote to business sought to be licensed:	5 hours per w	eek.
Will you take an active part in the operation of the business to be licensed?	✓ YES	□ NO
If YES, explain nature of activity (hours, day, week): Quality control and booking parties.		
Do you have any interest, direct or indirect, in any premises currently licensed by the Liquor Authority or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? If YES, provide information below:	☑ YES	□ NO
Business Name Business Address Date Interest Began Starjem LLC 40 East 52nd Street, New York, New York 10022 1999		or License No. 1027037
Starjem Restaurant Inc 34 East 52nd Street, New York, New York 10022 1993	1	027039
Other than as itemized in the above, have you ever applied in New York State, or Anywhere for a license or permit to traffic in alcoholic beverages, including Any application as a partnership or corporation in which you are/were a principal? If YES, provide information below: Name of applicant Address of premises Date of filing Licenses	☐ YES	✓ NO Disposition
Has a license or permit listed above been REVOKED, CANCELED Or otherwise Involuntarily Terminated? If YES, state action and date of action, and give details:	☐ YES	☑ NO
,		
Are you a police commissioner, other police official, subordinate of any police Department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer? If YES, provide details?	YES	☑ NO

6.	CONVICTION RECORD & PENDING CRIMINAL CASES		Section M
(a)	listed in this application or the spouse of such person) been convicted of a crime addressed by the provisions of Section 126 of the ABC Law (see instructions for statutory disqualification) which would forbid a person to traffic in alcoholic beverages?	_ YES	☑ NO
	If YES, supply details (attach additional pages as necessary):		
(b)	Have you or your spouse (or any officer, director, shareholder or partner Listed in this application or the spouse of such person) ever been CONVICTED (including pleas of guilty or suspended sentences of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?	_ YES	🗹 NO
(c)	If YES, attach a Certificate of Disposition by the court clerk for each case And a Certificate of Relief from disabilities if available and submit an Affidavit explaining all details. If you have reported all convictions to this Authority and were subsequently approved for a license, check here:	Approved:	
(d)	Are there any ARRESTS , INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) – including driving while intoxicated or impaired?	☐ YES	☑ NO
(e)	IF YES, PROVIDE COPY OF ACCUSATORY INSTRUMENT.		
(f)	If you are an applicant (i.e. proprietor, partner, stockholder, officer or Director), would any of the above questions require a YES answer if asked of your spouse?	_ YES	☑ NO
7.	INFORMATION CONCERNING AVAILABILITY OF PREMISES		
Exc	plain how you became aware of the availability of the proposed premises.		
	ough real estate broker.		
	•		
	· · · · · · · · · · · · · · · · · · ·		

the source of monies you will provide the applicant as per instruction sheet.						
State TOTAL AMOUNT OF MONEY you are providing the applicant:		\$	0			
Type of Investment (Investment Loan, Contract Debt)	Type of Investment Dollar (\$) Amount		Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)			
If you are guaranteed a loan as a co-	signer or putting up something of value as c	collate	eral.			
Identify Co-Signer or Collateral		lder	tify Loan/Describe Collateral			

IMPORTANT: Submit any and all records, documents and affidavits that you feel may assist you in explaining

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after the receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Signature of Applicant

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PERSONAL QUESTIONNAIRE

 All <u>principals</u> to the license application must complete this questionnaire in full. Answer all questions below. Make duplicate blank forms as necessary. Attach additional sheets if more space is needed. NAME OF APPLICANT: Starjem Foods LLC					
Statement of Identification	ation				
Print YOUR name:			Date of birth:		
Anthony M. Scotto, Jr.					
Residence street address of above:			Social Security number	r:	
County:			E-mail address:		
City, State, Zip:			Telephone number (res	sidence):	
U.S. citizen?	II C siting an atract of sitingation		If Alice registration # c	or Vice type:	
✓ YES □ NO	U.S. citizen - country of citizenship:		If Alien, registration # c	or visa type.	
List any other names that you have been	en known by (including maiden name):		<u> </u>		
Height	Hair Color Brown	Marital Statu			
Sex 🗸 Male 🔲 Female	Eye color Brown	Spouse Name Theresa Pisacani			
Weight 210lbs		Spouses Social Security #:			
2. Residences for the pa	st TEN years. (If more space is require	ed, attach add	itional sheets):		
Address			From (month/year)	To (month/year)	
3. Your occupation for th	ne past TEN years. (If more space is	required, atta	ch additional sheets).	. •	
From/To (month/year) Employer 1999 to date Starjem LLC 40	Address East 52nd Street, NY, NY 10022		Type of Business Restaurant	Position Co-Manager	
	ant Inc 34 East 52nd Street, NY, NY 1	0022	Restaurant	Co-Manager	
4. Position (or interest) you	will hold in the license application (check each	n):		
President Vice President Secretary Treasurer Chairman Officer OTHER	Director Stockholder Partner General Partner Limited Partner Sole Proprietor		Manager Lender Donor Guarantor LLC Manager LLC Member		

5. LICENSE HISTORY / AFFILIATIONS		Section M	
If you are an applicant (i.e.: proprietor, partner, stockholder, officer or director) or applicant's spouse, will you continue your present occupation or business?	✓ YES	□ NO	
If YES, list hours you will devote to business sought to be licensed:	Five hours per day.		
Will you take an active part in the operation of the business to be licensed?	✓ YES	□ №	
If YES, explain nature of activity (hours, day, week): Managing all aspects of business (minimal time in other licensed premises)			
Do you have any interest, direct or indirect, in any premises currently licensed by the Liquor Authority or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any			
real or personal property, or by any other means including loans?	✓ YES	☐ NO	
If YES, provide information below:			
Business Name Business Address Date Interest Began Starjem LLC 34 East 52nd Street, New York, New York 10022 1999	Lique 1027	or License No. 037	
Starjem Restaurant Inc 34 East 52nd Street, New York, New York 10022 1993	1027	7039	
Other than as itemized in the above, have you ever applied in New York State, or Anywhere for a license or permit to traffic in alcoholic beverages, including Any application as a partnership or corporation in which you are/were a principal? If YES, provide information below:	☐ YES	☑ NO	
Name of applicant Address of premises Date of filing Lie	cense No.	Disposition	
Has a license or permit listed above been REVOKED, CANCELED Or otherwise Involuntarily Terminated?	☐ YES	☑ NO	
If YES, state action and date of action, and give details:			
Are you a police commissioner, other police official, subordinate of any police Department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?	☐ YES	⊘ NO	
If YES, provide details?			

6.	CONVICTION RECORD & PENDING CRIMINAL CASES		Section M
(a)	Have you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) been convicted of a crime addressed by the provisions of Section 126 of the ABC Law (see instructions for statutory disqualification) which would forbid a person to traffic in alcoholic beverages? If YES, supply details (attach additional pages as necessary):	☐ YES	☑ NO
			•
			t
		1	
(b)	Have you or your spouse (or any officer, director, shareholder or partner Listed in this application or the spouse of such person) ever been CONVICTED (including pleas of guilty or suspended sentences of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?	☐ YES	☑ NO
(c)	If YES, attach a Certificate of Disposition by the court clerk for each case And a Certificate of Relief from disabilities if available and submit an Affidavit explaining all details. If you have reported all convictions to this Authority and were subsequently approved for a license, check here:	Approved:	
	Are there any ARRESTS , INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) – including driving while intoxicated or impaired?	☐ YES	☑ NO
(e)	IF YES, PROVIDE COPY OF ACCUSATORY INSTRUMENT.		
(f)	If you are an applicant (i.e. proprietor, partner, stockholder, officer or Director), would any of the above questions require a YES answer if asked of your spouse?	☐ YES	☑ NO
7.	INFORMATION CONCERNING AVAILABILITY OF PREMISES		
Fyr	plain how you became aware of the availability of the proposed premises.		
ı nr(ough real estate broker.	.	

8.	F	IN	Δ	N	CE	2
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Section M

IMPORTANT: Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant as per instruction sheet.							
State TOTAL AMOUNT OF MO applicant:	ONEY you are providing the	\$ _					
Type of Investment (Investment Loan, Contract Debt)	Type of Investment Dollar (\$) Amount		Source of Funds Accounts, Loans, Gifts, Asset Sales, etc.) enter identification numbers for accounts)				
If you are guaranteed a loan as a condentify Co-Signer or Collateral	o-signer or putting up something of value as o		al. fy Loan/Describe Collateral				
	*						
I understand that the inform statement or misrepresentate any license for which this ap	nation I submit will be relied upon by ion will constitute cause for the disapplication is submitted.	y the prova	State Liquor Authority and a false I of the application or revocation of				
will notify the Authority by re of the license, will notify t required notice will violate th	e herein are true and if any change o gistered or certified mail within 48 ho he Authority similarly within 10 day e Alcoholic Beverage Control Law an	ours o s. ໄປ	r if change occurs after the receipt inderstand that failure to give the				
Signature of Applicant		Date	e · · · ·				

PERSONAL QUESTIONNAIRE

 All <u>principals</u> to the license application Answer all questions below. NAME OF APPLICANT	on must complete this questionnaire in full. Starjem Foods, LLC	 Make duplicate blank forms as necess Attach additional sheets if more space is 		
Statement of Identification		•		
Print YOUR name:		Date of birth:		
Richard T. Fields				
Residence street address of above:		Social Security number:		
County:		E-mail address:		
City, State, Zip:		Telephone number (residence	θ):	
U.S. citizen? If NOT YES NO	U.S. citizen - country of citizenship:	If Alien, registration # or Visa	type:	
List any other names that you have been	en known by (including maiden name):	·		
	I			
Height <u>5'10"</u>	Hair Color Brown	Marital Status Married ,		
Sex 🗸 Male 🔲 Female	Eye color Blue	Spouse Name Meeka Dawson Fields		
Weight 170lbs		Spouses Social Security #:		
		•		
2. Residences for the pa	st TEN years. (If more space is require	ed, attach additional sheets):		
Address		From (month/year) To (mo	onth/year)	
		The second secon		
3. Your occupation for th	ne past TEN years. (If more space is			
•		required, attach additional sheets).		
From/To (month/year) Employer See attachment A.	Address	Type of Business	Position	
See attachment A.				
	***************************************		/8/10	
4. Position (or interest) you	ı will hold in the license application (check each):		
President Vice President Secretary Treasurer Chairman Officer	Director Stockholder Partner General Partner Limited Partner Sole Proprietor Coastal To Go LLC which is a member of	Manager Lender Donor Guarantor LLC Manager LLC Member		

5. LICENSE HISTORY / AFFILIA	ATIONS			Section M	
If you are an applicant (i.e.: proprietor or applicant's spouse, will you continu			✓ YES	□ NO.	
If YES, list hours you will devote to bu	-0-				
Will you take an active part in the ope	☐ YES	 ✓ NO			
If YES, explain nature of activity (hour	s, day, week):				
					
Do you have any interest, direct or ind by the Liquor Authority or business wh manufactured, transported or sold at v ownership, interlocking directors, mor real or personal property, or by any ot	nere any alcoholic bever wholesale or retail wheth gage or lien on, or own	rage is ner by stock ership of any	☐ YES	☑ NO	
If YES, provide information below:					
Business Name B	ਧੰ usiness Address	Date Interest Bega	nn . Liquo	Liquor License No.	
Other than as itemized in the above, hanywhere for a license or permit to train Any application as a partnership or co	iffic in alcoholic beverag	jes, including	☐ YES	✓ NO	
If YES, provide information below:					
Name of applicant Address of premis	es	Date of filing	License No.	Disposition	
Manager Manage					
Has a license or permit listed above b Or otherwise Involuntarily Terminate		ELED	☐ YES	☑ NO	
If YES, state action and date of action	, and give details:			•	
	,				
Are you a police commissioner, other Department, a Sheriff, Deputy, Under-			☐ YES	☑ NO	
If YES, provide details?					
·					
		,			

6.	CONVICTION RECORD & PENDING CRIMINAL CASES		Section M
(a)	Have you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) been convicted of a crime addressed by the provisions of Section 126 of the ABC Law (see instructions for statutory disqualification) which would forbid a person to traffic in alcoholic beverages?	☐ YES	☑ NO
	If YES, supply details (attach additional pages as necessary):		
			Marie Control of the
	,		
(b)	Have you or your spouse (or any officer, director, shareholder or partner Listed in this application or the spouse of such person) ever been CONVICTED (including pleas of guilty or suspended sentences of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?	☐ YES	☑ NO
(c)	If YES, attach a Certificate of Disposition by the court clerk for each case And a Certificate of Relief from disabilities if available and submit an Affidavit explaining all details. If you have reported all convictions to this Authority and were subsequently approved for a license, check here:	Approved:	
(d)	Are there any ARRESTS , INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you or your spouse (or any officer, director, shareholder or partner listed in this application or the spouse of such person) – including driving while intoxicated or impaired?	□ YES	☑ NO
(e)	IF YES, PROVIDE COPY OF ACCUSATORY INSTRUMENT.		
(f)	If you are an applicant (i.e. proprietor, partner, stockholder, officer or Director), would any of the above questions require a YES answer if asked of your spouse?	☐ YES	☑ NO
7.	INFORMATION CONCERNING AVAILABILITY OF PREMISES		
	plain how you became aware of the availability of the proposed premises.		
Fello	ow members of Starjem Foods, LLC identified the location.		***************************************
	•		legarge to the control of the contro

8. FINANCES

Signature of Applicant

IMPORTANT:	Submit any an the source of i	d all records, docume monies you will provid	ents and affidavits e the applicant as	that you feel may assis s per instruction sheet.	st you in explaining
State TOTAL AM	OUNT OF MON	EY you are providin	g the applicant:	\$ Z. S Hillio	<u>.</u>
Type of Inve (Investment Loan, まんしもらずれ	Contract Debt)	Type of Investment [(Accounts, Loans, G (enter identification in Back Accounts	
				(570	remont propoled
If you are guaranted		signer or putting up sor	nething of value as	collateral. Identify Loan/Describe	Collateral
statement or many license for I verify that state will notify the A of the license.	isrepresentation which this appoint ements made uthority by reg I will notify th	on will constitute can lication is submitted herein are true and pistered or certified the Authority similan	use for the disa _l l. I if any change (mail within 48 h ly within 10 day	by the State Liquor Approval of the applicators prior to the recours or if change occurs. I understand that aw and may result in	ation or revocation of ceipt of the license, I curs after the receipt at failure to give the
				1.160	



CERTIFICATE OF OCCUPANCY

Job Number ALT I 102119404

Di 31							
Block: 31 CONFORMS'SU	BSTANTIALI	LY TO THE APP	ROVED PLANS		ATIONS A	ND TO THE REC	UIREMENTS OF ALL APPLICABLE LA
RULES, AND.RI			SAND OCCUPAN	CIES SPECIF	ED HEREI	N. "	,
STORY	LIVE	MAXIMUM.	PERMISSI	BLE USE	AND O	CCUPANCY BUILDING	DESCRIPTION OF USE
	LOAD LBS. PER SQ. FT.	NO. OF PERSONS PERMITTED	DWELLING OR ROOMING UNITS	CODE HABITABLE ROOMS	USE	CODE OCCUPANCY GROUP	DESCRIPTION OF USE
SUBCELLAR :	og	60			6	B-2	MEN'S LOCKERS, MEN 6 WOMEN'S TOILETS, OFFICES, TENANT STORAGE
		178		•	6	F-3	EXERCISE ROOMS
CELLAR .	100	123			6	B-2, F-4 D-2	TENANT STORAGE, RESTAURANT, STORAGE, ELEC. FAN ROOM, ELEC. SWITCHBOARD ROOM, TEL.
					1		EQUIP. ROOM, NETWORK COMPARTMENTS CONFERENCE, TREATMENT ROOMS, OFFICES,
							WOMEN'S LOCKERS & TOILETS
ASEMENT	100	72			6	B-2	STORAGE .
ST FLOOR	100	142			6	E, B-1	LOBBY, LOADING BERTHS, OFFICE,
,			*		6	E, B-2	STORAGE, LOCKER ROOMS
EZZANINE (50	77			6	E B-2	OFFICE, MAILROOM STORAGE
							LOCKER ROOMS
ND FLOOR	40	4			6	F-4, D-2 B-2, E	CAFETERIA, KITCHEN STORAGE, OFFICES, LOCKER ROOMS
RD - 4TH	50 EA.	200 EA.			6	E	OFFICES
OPEN SPACI	USES	(SPECIFY-PA	RKING SPACES,	LOADING BEI	THS, OTH	R USES, NONE)	
THIS CERTIFIC		A NEW AN	MENDED CER	RTIFICATE	OF OCC	IALL BE MAI UPANCY IS C ATIONS COND	DE UNLESS DETAINED DITIONS AND SPECIFICATIONS

THAT THE ZONING LOT ON WHICH THE PREMISES IS LOCATED IS BOUNDED AS FOLLOWS:

distant 0 NORTH rect from the corner formed by the intersection of HANOVER SQUARE running thence thence SOUTH 120.67 Feet; thence thence thence thence To the point or place of beginning N.B. or All. No Date of completion Construction classification Date of completion Construction classification FIRE PROOF STRUCTURES Building occupancy group classification O.C. COM Height Stories 21 Feet 279¹ THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WASPULICABLE LAWS.
running thence thence NORTH 138.91 Feet; thence Feet; thence SOUTH 120.67 Feet; thence thence thence thence Feet; thence f
running thence thence NORTH 138.91
thence thence feet; thence feet; thence feet; thence feet; thence To the point or piece of beginning N.B. or Alt. No ALT I 102119404 N.B. or Alt. No Date of completion Construction classification FIREPROOF STRUCTURES Building occupancy group classification O. C. COM Height Stories 21 Feet 279 THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WARPLACABLE LAWS.
thence To the point or place of beginning N.B. or Alt. No N.B. or Alt. No Date of completion Date of completion O.C. COM Height Stories 21 THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WARPLICABLE LAWS.
N.B. or Alt. No N.B. or Alt. No N.B. or Alt. No Date of completion Construction classification FIREPROF STRUCTURES Building occupancy group classification O.C. COM Height Stories 21 Feet 279' THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WARPLICABLE LAWS.
Building occupancy group classification O.C.COM Height Stories 21 Feet 279' THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WAPPLICABLE LAWS.
Building occupancy group classification O.C. COM Height Stories 21 Feet THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WARPLICABLE LAWS.
THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WARPLICABLE LAWS.
APPLICABLE LAYS.
- Land -
YES NO YES NO
STANDPIPE SYSTEM AUTOMATIC SPRINKLER SYSTEM
YARD HYDRANT SYSTEM
TAIL THE THE THE THE TAIL THE TAIL THE
STANDPIPE FIRE TELEPHONE AND
SIGNALLING SYSTEM
SMOKE DETECTOR
FIRE ALARM AND SIGNAL SYSTEM
PIRE ADMINISTRATION OF THE PROPERTY OF THE PRO
STORM DRAINAGE DISCHARGES INTO:
CAPRIVATE SEWAGE DISPOSAL SYSTEM
A) STORM SEWER
SANITARY DRAINAGE DISCHARGES INTO:
FT PROPOSAL SYSTEM
A) SANITARY SEWER B) COMBINED SEWER C) PRIVATE SEWAGE DISPOSAL SYSTEM
·
TIONS OF DESTRICTIONS:
LIMITATIONS OR RESTRICTIONS:
BOARD OF STANDARDS AND APPEALS CAL. NO
CITY PLANNING COMMISSION CAL, NO
· ·
OTHERS:





CLICK HERE TO SIGN UP FOR BUILDINGS NEWS

NYC Department of Buildings

Property Profile Overview

10 HANOVER SQUARE		MANHATTAN 10005		BIN# 1000859	
HANOVER SQUARE PEARL STREET	4-12	Health Area	: 7700	Tax Block Tax Lot	: 31 . : 1
WATER STREET	110 - 124 76 - 88	Census Tract Community Board	: 7 : 101	Condo	I . : NO
		Buildings on Lot	: 1	Vacant	: NO
View DCP Addresses	Browse Block			View Certifica	tes of Occupa
Cross Street(s):	PEARL STREET,	OLD SLIP			
DOB Special Place Name:	•				
DOB Building Remarks:	•		•		
Landmark Status:		Special Status:		N/A	
Local Law:	YES	Loft Law:		NO	
SRO Restricted:	NO	TA Restricted:		NO	
UB Restricted:	NO		•		
Little 'E' Restricted:	N/A	Grandfathered	Sign:	NO	
Legal Adult Use:	NO	City Owned:		NO	•
Additional BINs for Buildin	g: NONE				
Special District:	LM - LOWER MA	NHATTAN			AND THE PROPERTY OF THE PROPER
			AND AND OF THE PARTY OF THE PAR		

Department of Finance Building Classification:

D6-ELEVATOR APT

Please Note: The Department of Finance's building classification information shows a building's tax status, which may not be the same as th the structure. To determine the legal use of a structure, research the records of the Department of Buildings.

	Total	Open	Elevator Records
Complaints	27	0	Electrical Applications
Violations-DOB	136	. 2	Permits In-Process / Issued
Violations-ECB	8	. 0	Illuminated Signs Annual Permits
Jobs/Filings	· 185		Plumbing Inspections
ARA / LAA Jobs	2		Open Plumbing Jobs / Work Types
Total Jobs	187		Facades
			Marquee Annual Permits
Actions	351		Boiler Records
OR Enter Action Type:			DEP Boiler Information
OR Select from List:	•		
Select		T	
AND Show Actions			

If you have any questions please review these Frequently Asked Questions, the Glossary, or call the 311 Citizen Service Center by dialing 311 or (212) NEW YORK outside of New York City.

PROOF OF CITIZENSHIP AFFIRMATION

Applicants may submit, as proof of citizenship, a signed and dated copy of a naturalization certificate or green card with an affirmation on the copy submitted as follows:

NOTE: This affirmation can only be submitted by an Attorney duly admitted to practice in the State of New York or a Notary Public. All other representatives must present original proof(s) to be verified by the Authority personnel.

nationly polosition	/
Applicant/Individual Name: STARSEM Fo	ODS LLC/RICHARD T. FIRIDS
I, the undersigned, Notary Public or an Attorney a	at Law duly admitted to practice in the State of New
☐ VISA, ☐ ALIEN REGISTRATION CARD, [OTHER PASSPORT
and affirms under the penalty of perjury that the original proof of citizenship. This affirmation is knowing that they will rely upon the sa	foregoing copy is a true and complete copy of the given to the Division of Alcoholic Beverage Control me in review of the license application of:
the applicant has signed his name directly in the sp	
Signature of Applicant	
This affirmation is given to the Division of Alcoholic Bevereview of the license application of:	erage Control knowing that they will rely upon the same in
Attorney or Notary must follow the following signatu	ire form:
ATTORNEY INFORMATION:	
Attorney name:	
Office address:	
City, Town or Village:	
Zip code: Teleph	one number:
E-mail address:	
Signature:	Date:
NOTARY INFORMATION:	
State of New York County of ~> SSSY	SEAL
County of ~~ SSA4	
- micht f. Fulis	STAMP
Signature of Notary Public U Stamp or seal with commission expires: 7/7 Date: 1/24/08	// TO A PUBLIC, State of New York No. 30-4864972 Qualified in Nassau County Cammission Expires July 7, 20
	MICHAEL J. PULEIO NOTARY PUBLIC, State of New York No. 30-4864972
	- 19 - Qualified in Nassau County Commission Expires July 7, 20 10

APPLICANT'S STATEMENT

Any answer or statement, which is false, made by the applicant may constitute perjury and may subject any permit or license issued hereunder to revocation or cancellation.

Elaina Scotto-Faucetta

the applicant, (sole proprietor, partner, corporate principal or LLC/LLP member) for an Alcoholic Beverage Control Retail License understand that the New York State Liquor Authority will **rely** on each and every answer in the application and accompanying papers in reaching their determination and state, under penalty of perjury, that all statements therein are **true** to the best of my knowledge and belief.

I further state that the location and description of the premises to be licensed does not violate any requirement of the ABC Law or local ordinances.

I verify if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in disapproval of your application, or revocation of the license.



NOTIFICATION RIDER TO NEW APPLICATIONS

Applicants for on premises licenses must complete Section F.

NOTICE TO MUNICIPALITY/COMMUNITY BOARD

Thirty days before submitting an application to the New York State Liquor Authority, you (the applicant) are required (by the Alcoholic Beverage Control Law, Section 64, subdivision 2a) to notify, in writing, the clerk of the village; town; city; or the local community board in New York City; where your premise is located and your intent to file your application with the NYS Liquor Authority.

Notification must be sent by Certified Mail, return receipt requested. The original receipt and copy of your Notification to the Municipality/Community Board MUST accompany your application.

- ▶ In New York City, notification is required for ALL on premises (beer, wine & liquor) applications. Notification is to be sent to the community board with jurisdiction over the area in which the premises is located.
- Outside New York City only on premise liquor applicants are required to notify the clerk of the city, town or village of the jurisdiction.

NOTE: APPLICATIONS CANNOT BE ACCEPTED IF THIS NOTIFICATION HAS NOT BEEN MADE AT LEAST 30 DAYS PRIOR TO FILING.

CEI	RTIFICATION RIDER 1	O APPLICATIONS	
I hereby certify that on the 10th		September	, 20 <u>07</u>
I have complied with the requirement	s of Section 64.2(a) of the Alco	holic Beverage Control Law, and ser	nt notification
of my application to become licensed	, by certified mail, return rec	eipt requested to the Clerk of the	
City Town V	/illage of		
Or, in New York City, the Clerk of Co	ommunity Board #		
Borough of Manhattan	Junes	$\frac{1}{2}$, where the pre	emises are located
Signature		Date ()	
Starjem Foods, LLC		Fresco By Scotto On The Go	0
Name of applicant		Trade name (DBA)	
114 Pearl Street aka 10 Hanover	Square	New York, New York 10005	5
Premises street address		City, State, Zip	

PHONE LISTINGS FOR NEW YORK CITY APPLICANTS

If you are unsure of which community board serves the area in which your premises are located, call the number listed below for the office of your Borough President:

 Manhattan
 Bronx
 Queens
 Staten Island
 Brooklyn

 212-669-8300
 718-590-3500
 718-286-2900
 718-816-2200
 718-802-3700

STATE OF NEW YORK LICENSING SERVICES DIVISION OF ALCOHOLIC BEVERAGE CONTROL

				DATE:	9/13	3/08
TO:	COMMUNIT	Y BOARDMUN	NICIPALIT	ΓY:		
	Conn	resity &	Board	#/		
	51 (resity &	St	Rm	7/5-	
		, Gerk				
		0				
	,		~ 1 (··		
Please	be advised that	on	1/3/0	8	. an On-Pre	emises liquor
		s filed with the Sta	te Liquor A	Authority fo	or the follow	ving premises.
Applica	ant's Name:	Star J.	EM	Java	ds LL	<u>C</u>
Premise	es Address:	114 /	learf	St. of	la Haze	Cover Sq
	_	Ken	Gar	V' My	1 1600	5
	•		//	7		

Attached please find a copy of the notice which the applicant sent to your Community Board/Municipality advising you of the filing of this application. This was done in compliance with the 1993 amendments to Subdivision 7 of Sections 64 and 64A of the Alcoholic Beverage Control Law that require the Authority to consult with local officials.

The Authority is mandated by this statute to provide the Community Board/Municipality an opportunity to present information relevant to this application. Testimony must take the form of a written submission from one individual duly authorized to represent your Board/Municipality in an official capacity.

The Authority is obligated to process applications in a timely manner and therefore advises you to take prompt action to determine what your official position will be on this application and communicate it as soon as possible. The official position of the Community Board/Municipality must be in writing and reflect the decision of a majority of the members present and entitled to vote during the presence of a quorum.

Thank you for your attention to this matter.

Sincerely,

Fred J. Gioffre

Deputy Commissioner Licensing Services

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017
(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

September 10, 2007

Manhattan Community Board No. 1 51 Chambers Street, Room 715 New York, New York 10007

Re:

Starjem Foods, LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, New York 10005

Dear Sir/Madam,

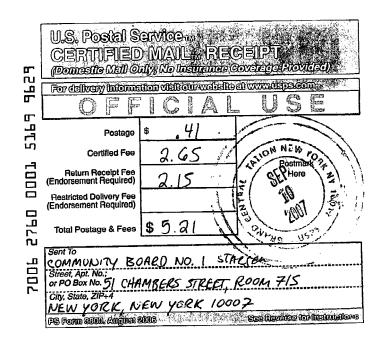
This is to advise that Starjem Foods LLC will be applying for an on-premises liquor license at the above location. The principals of Starjem are the Scotto family who also own and operate Fresco and Fresco on the Go at 34 and 40 East 52nd Street in Manhattan both highly acclaimed restaurants.

Notice is hereby given pursuant to the Alcoholic Beverage Control Law.

ery truly yours

Robert V. Ferrari

Via Certified Mail/ Return Receipt Requested



1 1962	U.S. Postal Service w CERTIFIED MAIL: RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.negoscom. OFFICIAL USE
7006 27 6 0 0001 5169	Postage Certified Fee Certified Fee Q. G.S Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Hequired) Total Postage & Fees Sant To COMMUNITY BOARD NO. I STACTAGE Street, Apt. No.; or PO Box No. 51 CHAMBERS STREET, ROOM, 7/S City, State, ZIP-4 NEW YOTCK, NEW YCRK 1000 7 PS Ferror 3800, August 2003 State Revoluce for Institutetions

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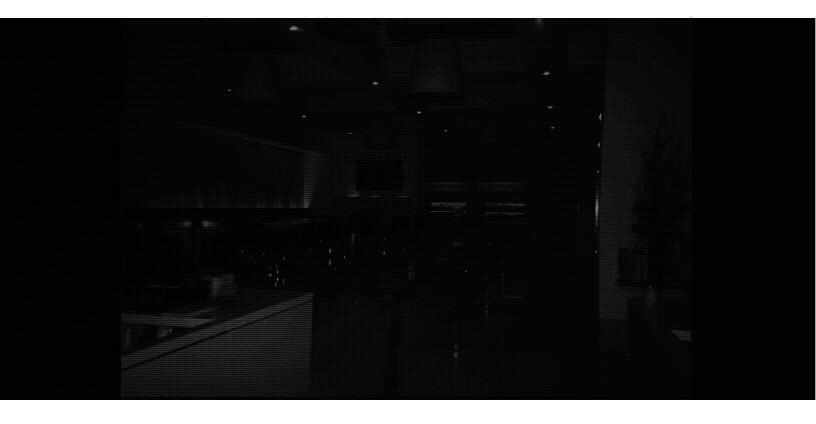
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STATE OF NEW YORK EXECUTIVE DEPARTMENT

DIVISION OF ALCOHOLIC BEVERAGE CONTROL

STATE LIQUOR AUTHORITY

Eliot Spitzer Governor

317 Lenox Avenue New York, New York 10027

Chairman Daniel B. Boyle

Commissioner Noreen Healey

Date: 03/10/2008

To: STARJEM FOODS LLC 114 PEARL ST AKA 10 HANOVER SQ HANOVER SQUARE & WATER STREET NEW YORK, NY 10005

RE: Case # 1205362 Starjem Foods LLC

Dear Applicant;

We are in the process of reviewing and investigating the application for the above listed premises. We find that we are in need of the following information:

- 1. Loan agreement between Richard Fields and Starjem Food LLC Members for the \$2,500,000 and documentation of the source of this money (bank statements etc).
- 2. Loan agreement for \$300,000.00
- 3. You have applied as a sidewalk cafe. What hours will the sidewalk area be used.
- 4. Please describe the source of the background music. Is this music outside the premise?
- 5. Please Submit a block plot diagram
- 6. Please submit 5" X 7" photos (original only/no color photo copies) of the interior of the premise (including all rooms and entrances/exits and exterior showing the front of the establishment and any arrears to which the exits leads. Please label the back of the photos with the case number, name of applicant, premise address, and the date the photos were taken.
- 7. Please submit color passport size photos (original only/no color photo copies) of the Principals. Please label the back with the case number, the name of the applicant and the premise name.

Please provide the requested information by March 24,2008. Thank you for your anticipated cooperation.

STATE LIQUOR AUTHORITY

Linda DeFazio-Ahmed Examiner 212-961-8313

Robert V. Farrari 630 3rd Ave 6th Fl New York NY 10017

cc:

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017 (212) 972-7040 TELECOPIER (212) 922-1939 E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

March 21, 2008

VIA OVERNIGHT MAIL
New York State Liquor Authority
317 Lenox Avenue, 4th Floor
New York, New York 10027
Attention: Linda DeFazio-Ahmed.
Examiner

Re: Starjem Foods ,LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, NY 10005 Serial No: 1205362

Dear Ms. DeFazio-Ahmed:

Enclosed are the following documentation/information in response to your letter dated March 10, 2008 regarding the above application:

- In point of fact, Richard T. Field's company, Coastal To Go LLC is investing \$2,500,000 in Starjem Foods, LLC for this venture (See annexed bank account statements evidencing the source of funds). There will be no loan in that amount from Mr. Fields to the applicant.
- 2. Copy of North Fork Bank loan agreement for \$300,000.
- 3. Sidewalk café hours of operation: 8:00AM to 9 PM.
- 4. Source of background music: satellite radio inside of Premises which will not be played outside.
- 5. Copy of block plot diagram.
- 6. Pursuant to our recent telephone conversation, this is to confirm that the Premises are presently under construction. Completion photographs of the Premises will be provided to the SLA together with the other items to be enumerated in the letter of conditional approval.
- Color passport photographs of the Applicant's three LLC Managers, Elaina Scotto-Faucetta,
 Anthony M. Scotto, Jr, and Marion Scotto were filed together with this application on February
 13, 2008. Additional copies of the same photographs are included herewith. If you locate the
 original photographs, please return this additional set to me.

ROBERT V. FERRARI

Also enclosed herewith are the following amended pages to this application:

Section A, page 2, Question 10(f): Corrected to reflect that Richard T. Field's company, Coastal To Go LLC, will be an LLC Member in Starjem Foods LLC, not Mr. Fields personally

Section B: Deleting reference at bottom of page to Richard T Fields. Mr. Field's company, Coastal To Go LLC is investing \$2,500,000 in this venture (See: personal questionnaire of Richard T. Field's as to source of funds), not Mr Fields personally.

Section C: Changed to reflect that Premises are within 500ft of three or more establishments selling liquor as is evidenced by enclosed sidewalk plot diagram. Also enclosed is corresponding public interest statement. Please have your office calendar a 500 foot hearing.

If you require further information, please do not hesitate to contact me.

Robert V. Ferrari

Enclosures



STATE OF NEW YORK EXECUTIVE DEPARTMENT DIVISION OF ALCOHOLIC BEVERAGE CONTROL STATE LIQUOR AUTHORITY

STATE LIQUOR AUTHORITY www.abc.state.ny.us

David A. Paterson Governor

317 Lenox Avenue New York, New York 10027 Chairman Daniel B. Boyle

Commissioner Noreen Healey

CONDITIONAL LETTER OF APPROVAL DATE 06/05/2008

101NEWOP1205362252 SERIAL NUMBER 1205362 SCOTTO, ROSANNA 360 E 88TH STREET NEW YORK, NY 10128

Premise Address STARJEM FOODS LLC

114 PEARL ST AKA 10 HANOVER SQ NEW YORK, NY 10005

Your application for a license has been reviewed and can be approved once you have complied with all of the conditions on the attached page.

Once you have submitted all of the required information, the documentation you provide will be reviewed and, if all of the items have been addressed to the satisfaction of the State Liquor Authority, your application can be approved and the license certificate issued.

No license will be issued until, and unless, all of the conditions have been met.

The application will be deemed disapproved if you fail to submit all required documentation within six months from the date of this letter. If you cannot comply within the 6 month period, you must seek an extension of time by submitting a request in writing to the Authority.

If you wish to withdraw your application, you must request your withdrawal in writing. The State Liquor Authority will then disapprove your application without prejudice to your refiling at a future date and will process your refund (less the filing fee).

Kerri J. O'Brien, Deputy Commissioner

NOTE: IF YOU WISH TO PICK UP YOUR LICENSE IN PERSON, 24 HOUR NOTICE AND A PHOTO I.D. ARE REQUIRED. NO LICENSE CAN BE ISSUED AFTER 3:30 P.M.!

NOTE: FAILURE TO COMPLY WITH THE ATTACHED CONDITIONS WITHIN 6 MONTHS FROM 06/05/2008 WILL NECESSITATE THE DISAPPROVAL OF THIS APPLICATION.

cc: ROBERT V FERRARI 630 3RD AVENUE 16TH FL NEW YORK, NY 10017

CONDITIONS OF APPROVAL

- 1. Completed CERTIFICATION FORM for new licensees (enclosed).
- 2. Copy of Certificate of Authority to collect taxes.
- $3. \ \ Completed \ IMPORTANT \ NOTICE \ TO \ LICENSEES \ form \ (enclosed).$
- 4. Submit a copy of the Certificate of Occupancy or other such document issued to the applicant by the local Code Enforcement Agency for the premises.
- 5. Submission of Newspaper Affidavit.
- 6. Workmans comp and Disablity Insurance.
- 7. APPROVED 6-5-08 DC



• STATE OF NEW YORK EXECUTIVE DEPARTMENT DIVISION OF ALCOHOLIC BEVERAGE CONTROL STATE LIQUOR AUTHORITY

www.abc.state.ny.us

David A. Paterson Governor 317 Lenox Avenue New York, New York 10027 Chairman

Daniel B. Boyle

Commissioner Noreen Healey

CONDITIONAL LETTER OF APPROVAL DATE 06/05/2008

101NEWOP1205362252 SERIAL NUMBER 1205362 SCOTTO, ROSANNA 360 E 88TH STREET NEW YORK, NY 10128

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CB JUL 20 PH 2

Premise Address
STARJEM FOODS LLC

114 PEARL ST AKA 10 HANOVER SQ NEW YORK, NY 10005

Your application for a license has been reviewed and can be approved once you have complied with all of the conditions on the attached page.

Once you have submitted all of the required information, the documentation you provide will be reviewed and, if all of the items have been addressed to the satisfaction of the State Liquor Authority, your application can be approved and the license certificate issued.

No license will be issued until, and unless, all of the conditions have been met.

The application will be deemed disapproved if you fail to submit all required documentation within six months from the date of this letter. If you cannot comply within the 6 month period, you must seek an extension of time by submitting a request in writing to the Authority.

If you wish to withdraw your application, you must request your withdrawal in writing. The State Liquor Authority will then disapprove your application without prejudice to your refiling at a future date and will process your refund (less the filing fee).

Sincerely Yours,

Kerri J. O'Brien, Deputy Commissioner

NOTE: IF YOU WISH TO PICK UP YOUR LICENSE IN PERSON, 24 HOUR NOTICE AND A PHOTO I.D. ARE REQUIRED. NO LICENSE CAN BE ISSUED AFTER 3:30 P.M.!

NOTE: FAILURE TO COMPLY WITH THE ATTACHED CONDITIONS WITHIN 6 MONTHS FROM 06/05/2008 WILL NECESSITATE THE DISAPPROVAL OF THIS APPLICATION.

cc: ROBERT V FERRARI 630 3RD AVENUE 16TH FL NEW YORK, NY 10017 48to

0 748106

CONDITIONS OF APPROVAL

- 1. Completed CERTIFICATION FORM for new licensees (enclosed). L
- 2. Copy of Certificate of Authority to collect taxes.
- 3. Completed IMPORTANT NOTICE TO LICENSEES form (enclosed). ι
- 4. Submit a copy of the Certificate of Occupancy or other such document issued to the applicant by the local Code Enforcement Agency for the premises.
- 5. Submission of Newspaper Affidavit.
- 6. Workmans comp and Disablity Insurance.
- 7. APPROVED 6-5-08 DC

CERTIFICATION FORM FOR NEW APPLICATIONS

Serial No. 1205362
This is to certify that I have complied with the following conditions:
1. That premises are constructed and equipped in accordance with the plans and specifications as approved by the NY State Liquor Authority.
 That the premises will be provisioned, staffed and conducted in accordance with the plan of management and/or method of operation submitted with the application to the Liquor Authority.
3. That the financing of the business, including the construction of the proposed premises, is in accordance with information supplied in support of the application to the Liquor Authority.
4. That the premises have been completed and are ready to be open and operated by the applicant.
Date: 7/17/08 Signature:
FOR GROCERY/DRUG STORES ONLY
Note that you may apply for a new three year license, which will authorize you to sell both beer and wine coolers. If you choose to do so, please submit a certified check, bank check, money order or personal check in the amount of If you have already paid for a separate Beer license and a Wine Cooler Permit, the fees for the new combined license have been adjusted in order to reflect only the additional amount due, if any.



Sales Tax Registration
W A Harriman Campus
Albany NY 12227-0001

STARJEM FOODS LLC 114 PEARL ST NEW YORK NY 10005-2864

New York State Department of Taxation and Finance

Certificate of Authority

Identification number

(Use this number on all returns and correspondence)



VALIDATED

06/10/2008

Dept of Tax and Finance

STARJEM FOODS LLC 114 PEARL ST NEW YORK NY 10005-2864

is authorized to collect sales and use taxes under Articles 28 and 29 of the New York State Tax Law.

Nontransferable

This cartificate must be prominently displayed at your place of business. Fraudulent or other improper use of this certificate will cause it to be revoked. This certificate may not be photocopied or reproduced.

DTF-17-A (7/03)

-COP0000019 1621700 -

Photographs - copyright of NYS Empire State Development

PAGE 02/02

FRESCO BY SCOTTO

12129323436

01/11/2008 15:23

STATE OF NEW YORK LIQUOR AUTHORITY

IMPORTANT NOTICE TO LICENSEES

REQUIREMENTS BEFORE A LICENSE MAY BE ISSUED

SALES TAX

The New York State Sales Tax Law requires that a person engaging in the sale of products subject to sales tax obtain from the Department of Taxation and Finance a "CERTIFICATE OF AUTHORITY TO COLLECT SALES TAXES." The Law requires that this Certificate be obtained.

Applicants will be required to present a copy of their "CERTIFICATE OF AUTHORITY TO COLLECT TAXES" to the State Liquor Authority before their license may be issued. Applicants may avoid delay in the issuance of their licenses by presenting a copy of their "CERTIFICATE OF AUTHORITY TO COLLECT SALES TAXES" with their initial application for a license.

Enter your Certificate #

	AGENCY USE	
	Verified by	Date
WORKERS COMPENSATION INSUR	ANCE	
Under the Workers' Compensation Law, you employees, or a corporation, unless you hav policies.	ur license cannot be issue e secured Workers' Comp	ed if you are an employer of one or more ensation and Disability Benefits insurance
Serial No 120 5362	Name	TAPTEM FOODS LLC
Premises Address 114 PEARL ST.	AKA DHONOVER	Sp Zip Code 10005
1. Are you an employer with one or more empl	oyees or a corporation? Ple	ase answer Yes or No
2. If yes, state the following:		7 ES
WC Policy No	Company	FIRST CARDINAL CORPORTIVE ASSOC OF FOOD
Eff. Date 7108, and DB Po	olicy No	
Company FIRST CARDINAL		Eff. Date 7/17/08
Signature MOM)	•	1 1
(If answer to question 1 is yes, question 2 must be d Unit at the appropriate zone office prior to issuance	completely filled out. This fo s of new license.)	rm must be submitted to License Processing

STATE OF NEW YORK

County of New York,

S.

NOTICE IS HEREBY given that a license, number 1205362 for liquor has been applied for by the undersigned to sell liquor at retail in a restaurant under the Alcoholic Beverage Control Law at 114 Pearl Street a/k/a 10 Hanover Square, New York, N.Y. 10005 for on premises consumption. Applicant-Starjem Foods LLC 973670 f29-F m7

Cynthia Byrd, being duly sworn, says that she is the PRINCIPAL CLERK of the Publisher of the NEW YORK LAW JOURNAL, a Daily Newspaper; that the Advertisement hereto annexed has been published in the said NEW YORK LAW JOURNAL in each week for 2 successive weeks, commencing on the 29th day of February, 2008.

TO WIT: FEBRUARY 29, 2008 MARCH 7, 2008

SWORN TO BEFORE ME, this 7th day

Of March, 2008.

Jennifer Hannafey

Notary Public, State of New York

No. 01ha6128042

Qualified in Richmond County Commission Expires June 09, 2009 Forward Newspaper
45 East 33rd Street
New York, New York 10016
Tel:800-266-0773 Fax:212-689-4255

Affidavit of Publication

To: Starjem Foods LLC

Re: Legal notice #22362

State of New York

SS:

County of New York }

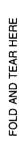
I, Gwen Blasen, being duly sworn, depose and say: that I am the Principal Clerk of English Forward, a weekly newspaper of general circulation published in New York, County of New York, State of New York; that a notice, of which the annexed is a printed copy, has been duly and regularly published in English Forward once each week for 2 consecutive weeks; and that the dates of publication were as follows: 02/29/08 and 03/07/08.

Sworn to before me this 7th day of March, 2008

Ronda C. Anderson

Notary Public, State of New York No. 01AN6022407

Qualified in New York County My commission expires on March 29, 2011 Notice is hereby given that a license, number 1205362 for liquor has been applied for by the undersigned to sell liquor at retail in a restaurant under the Alcoholic Beverage Control Law at 114 Pearl Street a/k/a 10 Hanover Square, New York, N.Y. 10005 for on-premises consumption. Applicant: STARJEM FOODS LLC



ON-PREMISES LIQUOR LICENSE

SERIAL #: 1205362 COUNTY: NEW YORK

EFFECTIVE DATE: 07/01/2012 EXPIRATION DATE: 06/30/2014

808457 CERTIFICATE #:

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO

THIS LICENSE SHALL NOT, BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW. METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

FRESCO BY SCOTTO ON THE GO 114 PEARL ST AKA 10 HANOVER SO

10005

STARJEM FOODS LLC

\$4,352.00 LICENSE - FEE

Dennis Rosen Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME:

NEW YORK

JUSON DURING 5

FOLD AND TEAR HERE

(212) 972-7040



STARJEM FOODS LLC Fresco By Scotto On The Go 114 Pearl Street a/k/a 10 Hanover Square New York, New York 10005

January 23 , 2013

State Liquor Authority
Division of Alcoholic
Beverage Control
317 Lenox Avenue, 4th Floor
New York, New York 10027
Attention: Licensing

LICENSE PASSESSING

OK TO ISSUE

MAR 1 2 2013

LICENSE PROCESSING

Re:

Starjem Foods, LLC

114 Pear Street a/k/a 10 Hanover Square

New York, New York 10005

Serial # 1205362

Dear Sir/Madam:

I am an LLC Manager of Starjem Foods, LLC (hereinafter, the "Company").

The Company's original license was lost during Hurricane Sandy and therefore, I am requesting a duplicate license be issued to the Company at your earliest convenience.

I hereby authorize Allison During to pick-up the Company's duplicate on-premises liquor license from the State Liquor Authority once issued.

Very truly yours,

Starjem Foods, LLC

Efaina Scotto, LLC Manager

BY HAND

Sworn to before me this

23rd day of January, 2013

Notary Public

Notary Public, State of New York
No. 31-1200140
Qualified in New York County
Commission Expires May 31, 19-2015

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1205362

Original

OFFICE USE ONLY Amended

STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.

Agency: NY State Liqu	uor Authority	Date:	March 11, 2013				
Division/Bureau:	Licensing						
1. Name of individu	ual appearing: [Allison During (Law Office of Rob	ert V. Ferrari)				
Address:	630 Third Avenue, 1	6th Floor, New York, New York 10	017				
Telephone:	(212) 972-7040						
2. Client represent	ed: Starjem Foods	LLC d/b/a Fresco By Scotto On Th	e Go, Serial No. 1205362				
Address:	114 Pearl Street a/k/	'a 10 Hanover Square, New York, N	New York 10005				
Telephone:	(212) 635-5000						
3. Subject of appea	ırance: 🔀 Re	gulatory/Enforcement	Lobbying				
Filing request for du	iplicate license issuan	ce.	2013 MAR	TICE STATE			
4. Acting in capacit	y of:		12				
Attorney	Lobbyist	Agent	W				
Other (descri	7.31.71	CERC		<u>ر</u> : آ			
5. Are you being co			y	3,			
If YES, Chec	k FEE or SALARY	FEE X SALARY		CV/			
6. Signature of individual appearing:							
7. Agency official (print name):							
Signature:							

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

STATE OF NEW YORK - LIQUOR AUTHORITY

		Renewal Application	n (Directions for	Completion e	nclosed)			
License fee: Filing fee: Total fee due:	•	4,352.00 90.00 4,442.00	4898	- ,	rour license icensed prer	mailed to nises addr	an addre	Complete if you war ess other than th
New effective New expiration		07/01/2010 06/30/2012			RE(EIVE	NUS a	1 5 2010
	STARJEM FOODS	TC			N. W.			
	114 PEARL ST AKA NEW YORK, NY 10	A 10 HANOVER SQ HA 005	AŃOVER SQUARE	& WATER ST	TREET			
				-			,	
NEW SERIAL 114 PEARL ST		SERIAL#: 101NEWOP R SQ NEW YORK, NY		_				
(Premise addres	rs)							
Make sure all na changes on the I		ation is correct, if not make	the necessary			5/4		
METHOD OF	OPERATION:	APPROV	/ED METHOD OF OI	PERATION				
DÁYS/HOURS	OF OPERATION:							
ADDITIONAL	INFORMATION:							
		METHOD OF OPERA ZONE OFFICE TO OB						MEPLEMTING
		ALL QUES	TIONS MUST BE	ANSWERED.				
	Any false answer or sta	atement made by the applic	cant constitutes perjury a	and will subject a	ny license h	ereunder t	o revocatio	n.
which hav	e not been reported to a	red since the signing of the nd acknowledged by the Stappropriate schedules A a	ate Liquor Authority che	ck "YES" and set	forth	YES	NO	
in facts ha	ave occurred, check "NO				1.	⁻ /		
	ther said licensed busine nit statement with explan	ess presently is regularly ke ation.	pt open and operated b	y the licensee.	2.			Not Applicable
appropriat	e zone office of the NYS		·		3.			Not Applicable
THE COMMENCENCE CHANGE OF FACT	MENT OF THE NEW LICEN: IS OCCURRING AFTER TH	NY CHANGE IN ANY OF THE SE PERIOD MUST BE REPOR E COMMENCEMENT OF THE CATION. CANCELLATION OR	RTED TO THE AUTHORITY NEW LICENSE PERIOD M	' IN WRITING BY CI MUST BE REPORTE	ERTIFIED OR	REGISTER	ED MAIL WI	ITHIN 48 HOURS. AN
THIS CE		BE SIGNED and DATE						TNERSHIP
therein, that the s that no physical or represents that a	same are true of his own changes have been made Il statements made in the	es that he is the applicant at knowledge, that he has con to the licensed premises si original application for this otherwise reported to and a	nplied and will continue t ince the issuance of the license and in any and a	to comply with all original license, e Il applications for	conditions u xcept those a renewal ther	pon which uthorized t	the origina by the State	l license was issued Liquor Authority; an
(Print i	name of licensee(s)		Date					
(Signa	ture of licensee(s)			(Home Address)			(Hor	me Telephone)
	THIS CER	TIFICATION TO BE SIG	GNED AND DATED	BY A CORPOR	RATION OI	R A CLUI	3	
	RPORATE OFFICER (COTTO – FAUCETTA	OR CLUB ALCOHOLIC		• •		MPLETE	THIS SE	CTION
of the above nam own knowledge; the behalf of said app to comply with all original license, e	(Prin Name of Corporate Office ned applicant corporation that he has been authoriz plicant corporation with the conditions upon which the except those authorized bor renewal thereof are tre) ; that he knows the contents ed by order of the Board of i e same force and effect as the original license was Issue y the State Liquor Authority ue and correct, except as n	Directors of said applica if said corporation made ed; that no physical chan ; and represents that all	on and the statement corporation to a such statements ages have been mustatements made	Pringles (Pringles) Pringles	wers there tements and itself; that censed pre al applicati	nd answers it has comp mises sinc on for this li	e same are true of hi s in this application i olied and will continu te the issuance of the icense and in any an
U.	10 HAL	1	Date G/II/2	2010			- 00:0	406 2642
	VVIII	<u></u>	1150 FIF	TH AVENUE, NE	n york, n	y 1012	8 (SIS)	826-5687

STATE OF NEW YORK - LIQUOR AUTHORITY

(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note if physical address of premises was changed by Post Office, City, Town, Village, 911 Emergency Systems, or 911 address reassignment, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (If different)
City, town or village - Zip Code Telephone Number		City, town or village - Zip Code (If different)
Landlord Name		Landlord Address

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. Submit copy of Certificate of Disposition or Police Report.

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case (submit copy)
			ļ	

1b. Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, or address changes) which have not been reported to the Authority or having been reported, have not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).

Nature of Change	Date	· Details

NOTICE TO MUNICIPALITY/COMMUNITY BOARD (ON-PREMISES LICENSES ONLY)

On Premises Licensees are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the clerk of the Village, Town or City wherein the premises are located, of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested.

YOU MUST SUBMIT THE NOTICE PROVIDED WITH THIS RENEWAL PACKET TO THE COMMUNITY BOARD OR MUNICIPALITY AND SUBMIT SAME TO THIS OFFICE ALONG WITH THE ORIGINAL OR A COPY OF THE CERTIFIED MAIL CARD OR RECEIPT



Bond Form L-9 Prescribed by the New York State Liquor Authority June 3, 1974

Application Number	Bond Number		This bond expires in 2012		Sum of Bond 00 Plus Costs
KNOW ALL MEN BY TH	IESE PRESENTS, that we				
Name of Applicant Starje Scotto On the Go	m Foods LLC DBA Fres	co By of	Address of Place of Bus 114 Pearl Street, York	iness a/k/a 10 Hanove:	r Square, New
in the county of Manhatta	in	, State	of New York	10005	, as Principal, and
Name of Insurance Compar	ny		Address of Office or usu		
WESTERN SURETY COMPANY		101 South Phillips Avenue Sioux Falls, SD 57104			

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect: subject, however, to the following conditions:

- 1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
- 2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
- 3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
- 4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
- 5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
- 6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension, or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.

7. In any action of proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent Alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in objection thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and conclusively or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

IN WITNESS WHEREOF the parties hereto have caused 1st day of July, 2010	these presents to be signed and sealed this 9 E. 37th St., 4th Floor
Name of issuing agency Global Coverage, Inc.	Address New York, NY 10016-2897
Traine of fouring agoing	Phone # (212) 683-2622
Starjem Foods LLC L.S.	Western Surety company
BY: Principal (Applicant/Licensee)	BY: Paul T. Bruflat, Senior Vice Pesident L. S.

Form 1480-A-4-2002

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017 (212) 972-7040 TELECOPIER (212) 922-1939 E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

May 4, 2010

Manhattan Community Board 1 49-51 Chambers Street, Room 715 New York, New York 10007

Re:

Starjem Foods LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, New York 10005

Dear Sir/Madam:

Enclosed is Renewal Application Notice Form from the State Liquor Authority.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Pobert V. Herrori

Enclosure

Via Certified Mail/ Return Receipt Requested



STATE OF NEW YORK EXECUTIVE DEPARTMENT DIVISION OF ALCOHOLIC BEVERAGE CONTROL STATE LIQUOR AUTHORITY

Standardized RENEWAL APPLICATION NOTICE FORM for Providing a

30-Day Advance Notice to a Local Municipality or Community Board

in connection with the submission to the State Liquor Authority of a
Renewal Application for an On-Premises Alcoholic Beverage License

1.	Date the Original copy of this Notice was Mailed to the Local Municipality or Community Board: O 5 0 4 2 0 1 0								
	THIS 30-DAY ADVANCE NOTICE IS BEING MAILED TO THE CLERK OF THE FOLLOWING LOCAL MUNICIPALITY OR COMMUNITY BOARD								
2.	2. Name of the Local Municipality or Community Board: MANITATTAN COMMUNITY BOARD NO. 1								
3.	Street Address of Local Municipality or Community Board: 49-51 CHAMBERS STREET, ROOM 715								
4.	City, Town, or Village: NEW YORK NY Zip Code: 10007								
5.	Telephone Number of Clerk of Local Municipality or Community Board: 2 1 2 - 4 4 2 - 5 0 5 0								
	ATTORNEY FOR THE LICENSE HOLDER SUBMITTING THE RENEWAL APPLICATION								
6.	Attorney's Full Name is: ROBERT V. FERRALI								
7.	Attorney's Street Address: 630 THIRD AVENUE 16th FLOOR								
8.	City, Town, or Village: NEW YORK NY Zip Code: 10017								
9.	Business Telephone Number of Attorney: 2 1 2 - 9 7 2 - 7 0 4 0								
	CURRENT LICENSE HOLDER WHO/THAT WILL SUBMIT THE RENEWAL APPLICATION TO THE STATE LIQUOR AUTHORITY								
10.	Type(s) of Alcohol sold under the License ("X" one): Beer Only Wine and Beer Only Liquor, Wine, and Beer								
11.	Extent of Food Service: ("X" one) Restaurant (Sale of Food Menu; Full Food Menu; Kitchen run by Chef) Tavern-Restaurant (A mixed-use establishment that has both a sit-down dining area and a "stand-up" bar where patrons may receive direct deliveries of alcohol) Tavern-Restaurant (A mixed-use establishment that has both a sit-down dining area and a "stand-up" bar where patrons may receive direct deliveries of alcohol) Tavern-Restaurant (A mixed-use establishment that has both a sit-down dining area and a "stand-up" bar where patrons may receive direct deliveries of alcohol)								
12.	Type of Establishment: Hotel Live Music Disk Jockey Box (Small Scale) Cabaret, Night Club, Discotheque (Large Scale Dance Club) Capacity for 600 or more patrons								
	(*X" all that apply) Club (e.g. Golf / Fraternal Org.) Bed & Catering Stage Topless Entertainment (Specify):								
13.	Licensed Outdoor Area: None Rooftop Patio or Deck Freestanding Covered Structure Garden / Grounds Grounds Grounds								
14.	Will the License Holder or a Manager be physically present within the establishment during All Hours of Operation? ("X" one):								
15.	License Serial Number: 12053G2 16. Expiration Date: 0 G 3 0 8 2 0 1 0								
17.	The License Holder's Full Name, as it appears on the Alcoholic Beverage License Certificate, is: STARJEM FOODS LLC								
18.	The Full Name of the Establishment (the Trade Name under which the Licensed Establishment conducts business) is: FRES CO BY SCOTTO ON THE GO								
19.	The Licensed Establishment is located within the building which has the following street address: 114 PEARL STREET A/K/A 10 HANOVER SQUARE								
20.	City, Town, or Village: NEW YORK NY Zip Code: 10005								
21.	The Licensed Establishment is located on the following floor(s) of the building at the above address: FIRST FLOOR AND BASEMENT								
22.	Within the building at the above address, the Licensed Establishment is located within the room(s) numbered as follows: NA								
23.	Business Telephone Number of Current License Holder: 2 1 2 - 6 3 5 - 5 0 0								
24.	Business Fax Number of Current License Holder:								
25.	Business E-Mail Address of Current License Holder:								
26.	Does the License Holder own the building in which the Licensed Establishment is located? ("X" one) Yes If "YES", SKIP items No. 27-30. Complete the 3 entries at Item No. 31. No If "NO", ANSWER items No. 27-30, and complete the 3 entries at Item No. 31.								
	OWNER OF THE BUILDING IN WHICH THE LICENSED ESTABLISHMENT IS LOCATED								
27.	Building Owner's Full Name is: TEN HANOVER LLC C/O THE WITKOFF GROUP LLC								
28.	Building Owner's Street Address: 220 EAST 42ND STREET								
29.	City, Town, or Village: NEW YORK, NEW YORK Zip Code: 10017								
30.	Business Telephone Number of Building Owner: 2 0 3 - 5 5 2 - 9 1 6 7								
31.	I hold the License or am a Principal of the Legal Entity that holds the License. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the existing license. I understand that representations made in this form will also be relied upon, and that false representations may result in revocation of the license. By my signature, I affirm – under Penalty of Perjury – that the representations made in this form are true.								
	ELATINA COUTTO-FOLICETTA MEMBON/MANDER X SIGNATURE X								



STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.

	cy: New York State Liquor Authority	ate: June 11, 2010
Divisio	on/Bureau: Renewals Department	
1.		
	Address: 630 Third Avenue, 16th Floor, New York, New York 10017	
	Telephone: (212) 972-7040	
2.	. Client represented: Starjem Foods LLC	
	Address: 114 Pearl Street a/k/a 10 Hanover Square, New York, New York	k 10005
	Telephone: (212) 635-5000	· <u>· · · · · · · · · · · · · · · · · · </u>
3.	Subject of appearance: ✓ Regulatory/Enforce Filing renewal application for on-premises liquor license.	ment Lobbying
4.	. Acting in capacity of:	
	/ A	
	* Attorney Lobbyist	
	✓ Attorney Lobbyist Agent Other (describe)	
5.	Agent Other (describe)	Yes: <u>√</u> Fee Salary
6.	Agent Other (describe) No If Yes No No If Yes No No If Yes No If Yes No	Yes: _√ Fee Salary
6.	AgentOther (describe) Are you being compensated? Yes No If Yes Signature of individual appearing:	Yes: _√ Fee Salary

^{*}A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

N. Y. S. DEPARTMENT OF STATE DIVISION OF CORPORATIONS

ALBANY, NY 12231-0001

FILING RECEIPT

ENTITY NAME : STARJEM FOODS LLC

DOCUMENT TYPE : ASSUMED NAME LTD LIABILITY CO

ETTER. FILED: 06/03/2010

FILER: FILED: 06/03/1

FILM#: 20100603055

ROBERT V FERRARI 630 THIRD AVE

16TH FL

NEW YORK NY 10017

PRINCIPAL LOCATION

114 PEARL ST A/K/A 10 HANOVER SQ. & WATER ST

NEW YORK
NY 10005

COMMENT:

ASSUMED NAME

FRESCO BY SCOTTO ON THE GO

SERVICE COMPANY : +++ NO SERVICE COMPANY +++ CODE:
BOX:

DOA

FEES 50.00 . PAYMENTS: 50.00

FILING: 25.00 CASH:

COUNTY: .00 CHECK:

COPIES: .00 C CARD: 50.00 MISC: .00

HANDLE : 25.00

REFUND :





ON-PREMISES LIQUOR LICENSE
SERIAL #: 1205362
COUNTY: NEW YORK

EFFECTIVE DATE: 06/18/2010
EXPIRATION DATE: 06/30/2012
CERTIFICATE #: 780270

KIEW YURK STAVE MUJUUR ALITHURHIY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

STARJEM FOODS LLC
FRESCO BY SCOTTO ON THE GO
114 PEARL ST AKA 10 HANOVER SQ
NEW YORK NY 10005

FILING FEE
~LICENSE FEE

\$90.00 \$4,352.00

Deni Rom

Dennis Rosen Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (10/09)

Certificate No. B780270

FOLD AND TEAR HERE

RENEWAL ADVISORY

Serial #: 1205362

Key: 121NEWOP1205362252

License fee:

581504

4,352.00

Filing fee:

Total fee due:

4,442.00

New effective date: New expiration date:

07/01/2012 06/30/2014

Premises Address:

STARJEM FOODS LLC FRESCO BY SCOTTO ON THE GO

RECEIVED JUN 1 2 2012

114 PEARL ST AKA 10 HANOVER SQ HANOVER SQUARE & WATER STREET NEW YORK, NY 10005

This letter is to notify you that your current license is due to expire on 06/30/2012. The renewal procedures have changed so please review all forms / instructions carefully.

THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE.

The renewal application form can be found on the Authority's website at www.sla.ny.gov/renewals

You must complete the renewal application and return it with this renewal advisory to the address below:

M&T Bank Lockbox New York State Liquor Authority PO Box 8000-Dept 930 Buffalo, New York 14267

You must include this renewal advisory, the completed renewal application, appropriate fee and all other required documents.

The required Community Board / Municipality notice form for on-premises licensees is also available on our website. You must notify the Community Board / Municipality at least 30 days prior to sending the renewal forms to the Authority.

NOTE: Renewal applications must be mailed to the address shown above. Applications sent to any other address will be returned and will delay the processing of your renewal.

Please complete all of the fields provided in the form. If the Trade Name has changed since the last renewal filing you must also include a filing receipt or a certificate of assumed name with the renewal application. Other changes noted on the renewal application do not constitute proper notification to the Authority, nor does the approval of the renewal application constitute approval of any changes listed in the renewal, other than the Trade Name change.

	Premises Inf		ion YES NO		y		
If yes, is your lic	ense in safekeep	ing with	the New Yo	rk State Liqu	or Authorit	y? () \	res no
Licensed Premises Name: Starjem Foods, LLC					License Ser		05362
Trade Name (if applicable): Fresco By Scotto On The Go			Eff	e: 07/01/2012			
	entification Number :				Ex	piration Da	ite: 06/30/2012
If you hold an on-pre	emises license, please	select the r	nethod of ope	ration from the fo	ollowing list:		
	○Bar/Tavern ○Club (i.e., Frate	⊜Cal	oaret	○Cafe	Catering Es	stablishme Restaura	
Attach additiona Address of the Li ALL SECTIONS M	censed Premises UST BE COMPLE s been changed a change from the	oy the Au sary. <u>E</u> TED IN OI s a result local Mun	RDER TO AP of a 911 cha	PROVE YOUR		of the cha	ange such as notification e Post Office.
City: New York		7					
THEW TOTA		State:	New York		Zip Code:	10005	
County: New York		Email	Address:	elaina@1	frescobyscotto	.com	
Premises Telephone #			635-5000	Contact Phon	ne # (include ar	ea code):	(212) 972-7040
Mailing Address	if different than p	<u>oremises (</u>	address)				
Mailing Address:							
City:		State:			Zip Code:		
Landlord/Buildin	Owner Name a	nd Addre	ss - also red	quired if build	dina is own	ed by the	liconcoo
	Hanover LLC c/o The					ed by tile	: ircensee
Address: 220	East 42nd Street						
City: New York		State:	New York		Zip Code:	10017	

2. Arrest/Conviction Information

Has the applicant or (if partnership) any of the partners, or (if a corporation) any of the officers, directors, stockholders, or any agent or employee of the applicant, been ARRESTED and/or CONVICTED during this renewal period (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind O Previously Reported

If YES, complete the chart below and where applicable, submit a Police Report, Certificate of Disposition, Certificate of Conviction or a Certificate of Relief from Disabilities from the Court Clerk for each case. If necessary, attach

Name of the Defendant	Connection with Licensed Premise (licensee, officer, employee)	Date of Offense	Nature of the arrest and/or conviction	Disposition

3. Applicant Information and Certification

The signature below certifies that I know the contents of this application and the statements contained therein; that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions included with this application for the renewal and agree to comply

A. Sole Proprietor (This section must be completed, signed and dated by the sole proprietor.)

			- anted by the sole proprietor.)
Print Name:		Date of Birth:	Social Security #:
Residence stree	et address:		
City:		State: Zip Co	de:
Telephone # (in	clude area code):	Cell Ph	none # (include area code):
Signature		Title	Date
3. Partnershi	in (This section		

B. Partnership (This section must be completed, signed and dated by each partner.)

	must be completed, signed and date	d by each partner.)
Print Name:	Date of Birth:	Social Security #:
Residence street address:		
City:	State: Zip Co	ode:
Telephone # (include area code):	Cell Phone	# (include area code):
Partner Signature	Title	Date

B. Partnership (Continued -attach additional sheets if necessary)

	:	Date of	Birth:	Social Security #:	
Residence s	treet address:				
City:		State:	Zip Code:		
Telephone #	(include area code):		Cell Phone # (include area code):	
Partner Sign	a ture	-	Title		
C. Corpora	ation, LLC or LLP		completed size	Date I and dated by an authorized office	er.
Print Name:	Anthony Scotto, Jr	Date of B		Social Security #:	
Residence str	reet address:				
City:		State:	Zip Code:		
Title:	LLC Manager				
elephone	(include area code):		Cell Phone #(ii	nclude area code):	
			MEMBUR	6/5/12	
Utholized Signal		Tit he license must be l	tle	Date	
Attach addit	tional sheets as need	ne license must be l ded to include all prin	listed below. cipals)		
	Elaina Scotto-Faucetta			Social Security #:	
				->	
esidence stre	et address:			,	
esidence stre	et address:	State:	Zip Code:		
ity:	et address: LC Manager	State:	Zip Code:		
ity: [L		State:	Zip Code: Cell Phone # (inc		
ity: [Li	LC Manager	State: Date of Birth	Cell Phone # (inc		
ity: [Li	LC Manager nclude area code):		Cell Phone # (inc	lude area code):	
ity: tle: clephone # (in	LC Manager nclude area code):		Cell Phone # (inc	lude area code):	
ity: tle: clephone # (in int Name: sidence stree y:	LC Manager nclude area code):	Date of Birth	Cell Phone # (inc	lude area code):	

List of other principals continued (Attach additional pages as needed to include all principals)

r			, , , , , ,
Print Name:	Marion Scotto	Date of Birth:	Social Security #:
Residence str	reet address:		
City:		State: Zip Code:	
Title:	LLC Manager		
Telephone #	(include area code):	Cell Phone # (i	nclude area code):
Print Name:	Coastal To Go LLC	Date of Birth: Not Applicable	Social Security #: Not Applicable
Residence stre	eet address:		
City:		State: Zip Code:	
Title:	LLC Member		
Telephone # (i	nclude area code):	Cell Phone # (ir	nclude area code):
O. Club (Th who has l	is section must be con been approved by the	npleted, signed and dated by the Club State Liquor Authority.)	Alcoholic Beverage Control (ABC) Officer
Print Name:		Date of Birth:	Social Security #:
esidence stre	et address:		Joodin Security #.
ity:		State: Zip Code:	
itle:			
elephone # (in	oclude area code):	Cell Phone # (inc	lude area code):
Authorized Si	ignature	Title	
		<u> </u>	Date

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

oune 5, 1974			COLIC BEVERAGE CONTROL LAV
Application Number	Bond Number	This bond expires in 2014	Penal Sum of Bond
KNOW ALL MEN BY THESE I	PRESENTS, that we	2014	\$1,000.00 Plus Costs
Name of Applicant		Address of Place of Busines	50
Starjem Foods LLC dba On The Go	Fresco By Scotto		K/A 10 Hanover Square
n the county of Manhattan		-, State of NEW YORK	10005
Name of Insurance Company		Address of Office or usual I	10005, as Principal, and
WESTERN SURETY C		P.O. Box Sioux Falls, SD	5077 57117-5077
ork in the penal sum set forth al xtent of One Thousand Dollars (\$ irincipal and surety, bind ourselve VHEREAS, the above bounden premit under the Alcoholic Bevera he Official Compilation of the Cod aving required the principal to fil IOW, THEREFORE, the conditions he date designated in said license ermit period, suffer or permit anyow or hereafter issued by said Start 53 of Subtitle B of Title 9 of the 6 of the Rules of the State Liquor suance of an order of warning, at exed or allowed in any action or everage Control Law, or of any cuscellation, revocation or suspens. Rules of the Authority, or costs aw; then this obligation shall be inditions: 1. An action for the breach of for the violation of any precised by the State Liquor Subtitle B of Title 9 of the 36 of the Rules of the Authority. 2. The aggregate liability of the sum of this bond plus costs (\$1,000.00). 3. Upon the payment of any lease the sum of the payment of any lease th	cove and for the payment (1,000.00) for the payment (1,000.00) for the payments, successors, and assign fincipal is making appliting a control Law and the les, Rules and Regulation e with it a bond to the Post of this obligation are sure or permit, is granted to a violation of the provisit at Liquor Authority, or the Cofficial Compilation of Authority), for the cancer of the rules now or here in the rules now or here in or issuance of an ord taxed or allowed in any the void; otherwise to remain condition of this borovision of said Alcoholic Authority, or for cause a Official Compilation of trity).	t of any costs taxed or allowed nt of which sum or sums, well is, respectively, jointly and severation to the New York State said State Liquor Authority, by is of the State of New York (Ruster) and the State of New York, and that if the said license or pethe said principal and the principal of the Alcoholic Beverage Cogive cause, as provided in the factor of the Codes, Rules and Regulative ellation, revocation or suspensive penalties which shall accrue to stituted for a violation of any of after issued by said State Liquer of warning as provided in the review pursuant to Section 121 main in full force and effect: said may be maintained without it Beverage Control Law, or of a sprovided by the Alcoholic Be the Codes, Rules and Regulation my and all defaults hereunder shy action or proceeding to the	to solvency and responsibility and into the People of the State of New in any action or proceeding to the and truly to be made, we, the said trally, firmly by these presents. Liquor Authority, for a license of Part 81 of Subtitle B of Title 9 of le 9 of the Rules of the Authority) as provided in said Law aforesaid, armit applied for, which expires on control Law, or of any of the rules Alcoholic Beverage Control Law or conso of the State of New York (Rule on of said license or permit or the hereunder, together with all costs of the provisions of said Alcoholic Beverage Control Law of the State of New York (Rule of the State of New York (Rule hall in no event exceed the penal extent of One Thousand Dollars ted to the rights and remedies of
4. Any action brought for the expiration of the license or action or proceeding. In the	e penal sum of this bo permit period aforement	nd shall be commenced within ioned, or for costs within one y	n twenty-four months after the ear after final disposition of any ding to review the Authority's ermination of the proceeding or
iiligation.		THE THE STATE OF THE STATE OF THE	ermination of the proceeding or chall be in effect and during any
suspension of the aforesaid unless said project a cance of compension of the said of the	license or permit or the	issuance of an order of warnin der of warning shall have been	y the revocation, cancellation or g by the State Liquor Authority reversed or annulled by a Court
principle and surety and si principle and surety to be the size of the burst be size duly isseed being him es uret 81 of Subtitute of title 9 of 9 of the Rules of the State Lice	hall be conclusively pre- hall be conclusively pre- ond filed with the State n or facsimile signature y company and binding of the Official Compilation of yuor Authority).	nt further proof of due executions sumed to have been duly execution. Authority and bearing the of its representative shall be confit, its successors and assigns of Codes, Rules and Regulations.	y the revocation, cancellation or g by the State Liquor Authority reversed or annulled by a Court or named herein as Surety waive erroneous, improper or defective amount of the penal sum of the facsimile signature. Any bond application of the State Liquor in thereof by or on behalf of the cuted by and on behalf of the che printed or facsimile name of conclusively presumed to be the for the amount specified in Part s of the State of New York (Rule
WITNESS WHEREOF the pa	rties hereto have ca	used these presents to b	e signed and sealed this
Name of issuing agency GLOBAL	COVERAGE, INC.	9 E. 37 Address YORK, N	TH ST., 4TH FLOOR, NEW Y 10016-2897
rjem Foods LLC dba Fre		Phone #	(212)683-2622
otto On The Go Principal (Applicant/L	1. 9	/ /	ETY COMPANY
1 1/1		TIT	irety) //
	I	Paul T. Bruflat, Senior	Vice Placidant L. S.
180-4-4-200#		zaur I. Diuliat, Senioi	vice resident

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017 (212) 972-7040

TELECOPIER (212) 922 - 1939 E-MAIL: rvf@rvferrari.com

MICHAEL FERRARI mf@rvferrari.com

May 8, 2012

Manhattan Community Board No. 1 49-51 Chambers Street, Room 715 New York, New York 10007

Re:

Starjem Foods LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, New York 10005

Dear Sir/Madam:

Enclosed is Renewal Application Notice Form from the State Liquor Authority.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Ferrari

Enclosure

Via Certified Mail/ Return Receipt Requested

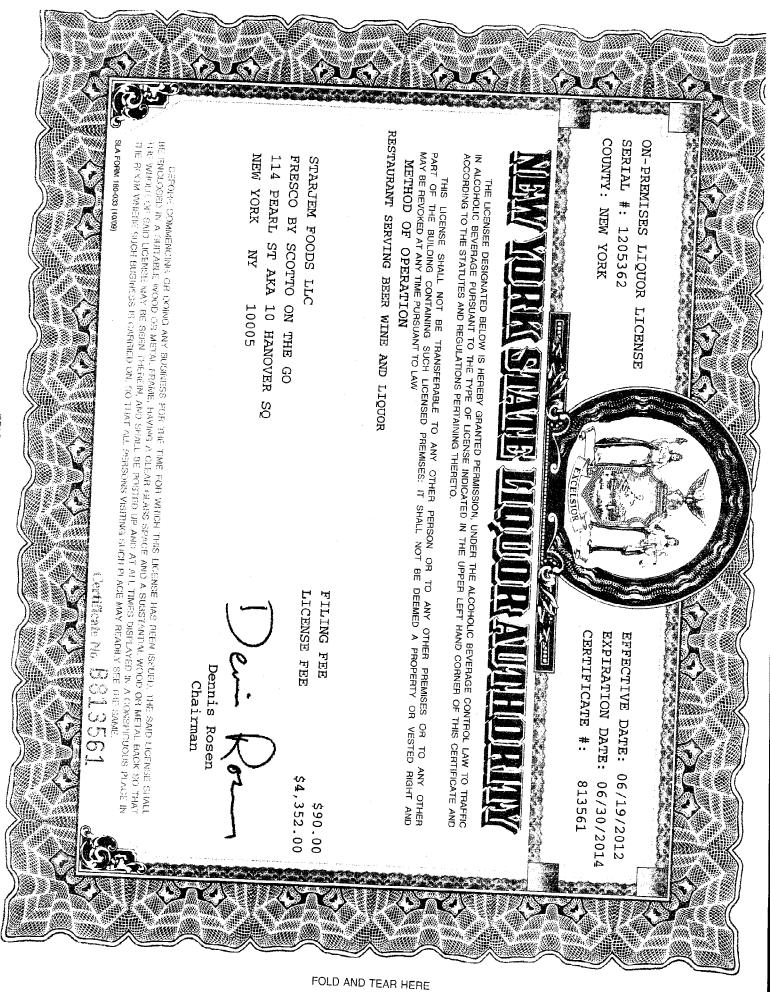
U.S. Postal Service ™ CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 8601 45 Postage Certified Fee 2.95 Return Receipt Fee (Endorsement Required) 2.35 Restricted Delivery F \$ S. 75 MANHATTAN COMMUNITY BOARD NO. I

OF PO BOX NO. 49-51 CHAMBERS STREET, ROOM 715 NEW YORK 10007

STATE OF NEW YORK EXECUTIVE DEPARTMENT

	ECUTIVE DEPARTMENT	Community Board in connection with the submission to the State Lupton Solthway of a (Check one)
	VISION OF ALCOHOLIC BEVERAGE CONT	ROL New Application Renewal Application Application
ST	ATE LIQUOR AUTHORITY	Corporate Change for an On-Premises Alcoholic Beverage License
1	Date the original copy of this Notice was mailed to	
		o the Local Municipality or Community Board. O 5 0 8 2 0 1 2 ING PROVIDED TO THE CLERK OF THE FOLLOWING LOCAL MUNICIPALITY OR COMMUNITY BOARD
2.	Name of the Local Municipality or Community Bo	
	ATTORNEY RE	PRESENTING THE APPLICANT IN CONNECTION WITH THE APPLICANT'S
	LICENSE APPLICATION	ON NOTED AS ABOVE FOR THE ESTABLISHMENT IDENTIFIED IN THIS NOTICE
3.		ert V. Ferrari
4.		Third Avenue, 16th Floor
5.		v York . State: New York Zip Code: 10017
6		2) 972-7040
	FOR NEW APPLICAN FOR ALTERATION APPLICA	ts, provide description below using all information known to date ints, attach complete description and diagram of proposed alteration(s)
	FOR CURRE	INT LICENSEES, SET FORTH APPROVED METHOD OF OPERATION ONLY
-		OT USE THIS FORM TO CHANGE YOUR METHOD OF OPERATION
7.	Type(s) of alcohol sold or to be sold under the lice: Extent of Food Service:	Beer Only Wine and Beer Only Liquor, Wine and Beer
8 .	1 11 1	Restaurant (Sale of food primarily; Full food menu; Kitchen run by chef) Tavern/Cocktail Lounge/Adult Venue/Bar (Alcohol sales primarily-meets legal minimum food availability requirements)
	Hotel Liv	e Music Disc Jockey Juke Box Patron Dancing (Small scale) Karaoke Bar
9.	Type of establishment: Cabaret, Night Cl. ("X" all that apply)	ub, Discotheque (Large Scale Dance Club) Capacity for 600 or more patrons Bed & Breakfast
	Club (e.g. Golf/	
	Fraternal Org.)	Catering Facility Stage Shows Topless Entertainment Recreational Facility (Sports Facility/Vessel)
10		poltop Patio or Deck Freestanding Covered Structure Garden/Grounds
	(*X* all that apply) Sidewalk Café	Other (Specify) None
11.	Will the license holder or a manager be physically	present within the establishment during all hours of operation? ("X" one)
12.	License serial number: 1205362	Expiration Date: 06/30/2012
13.	The applicant's or license holder's full name, as it	
14	The Trade name, if any, under which the establish	
15.	The establishment is located within the building w	r last by section and the do
		TTT Team Sideet a to Transvet Square
16.	City, Town, or Village. New York	NY Zip Code: 10005
17	The establishment is located on the following floor	s) of the building at the above address: First Floor and Basement
18	Within the building at the above address, the estab	olishment is located within the room(s) numbered as follows: Not Applicable
19	Business telephone number of applicant/licensee.	(212) 635-5000 Business fax number of applicant/licensee (212) 635-5001
20	Business e-mail address of applicant/beensee	Elaina@frescobyscotto.com
21	Does the applicant or license holder own the builds	ng in which the establishment is located? ("X" one) Ves. (If "Yes", SKIP items 22-25) No
i	OWNER OF	THE BUILDING IN WHICH THE LICENSED ESTABLISHMENT IS LOCATED
22.	Building owner's full name is: UDR 10	Hanover LLC c/o Cushman and Wakefield, Inc.
23.	Building owner's street address: 100 Wall	Street. 28th Floor
24.	City, Town, or Village: New York	SINY Zip Code. 10005
15.	Business telephone number of building owner:	2 1 2 - 7 0 9 - 0 7 6 8
	representations made in summittee documents re-	incipal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with lied upon by the Authority when granting the license. I understand that representations made in this form will also be
	renea upon, and mat to	use representations may result in disapproval of the application or revocation of the license.
6	By my signature, I i	affirm - under Ponalty of Perjury - that the representations made in this form are true.
1	Marion Scotto	LLC Manager/Member

Standardized NOTICE FORM for Providing a 30-Day Advance Notice to a Local Municipality or



p.2



<u> </u>	OFFICE USE ONLY
Original	Amended Date
	Amended Date NEW-YORK

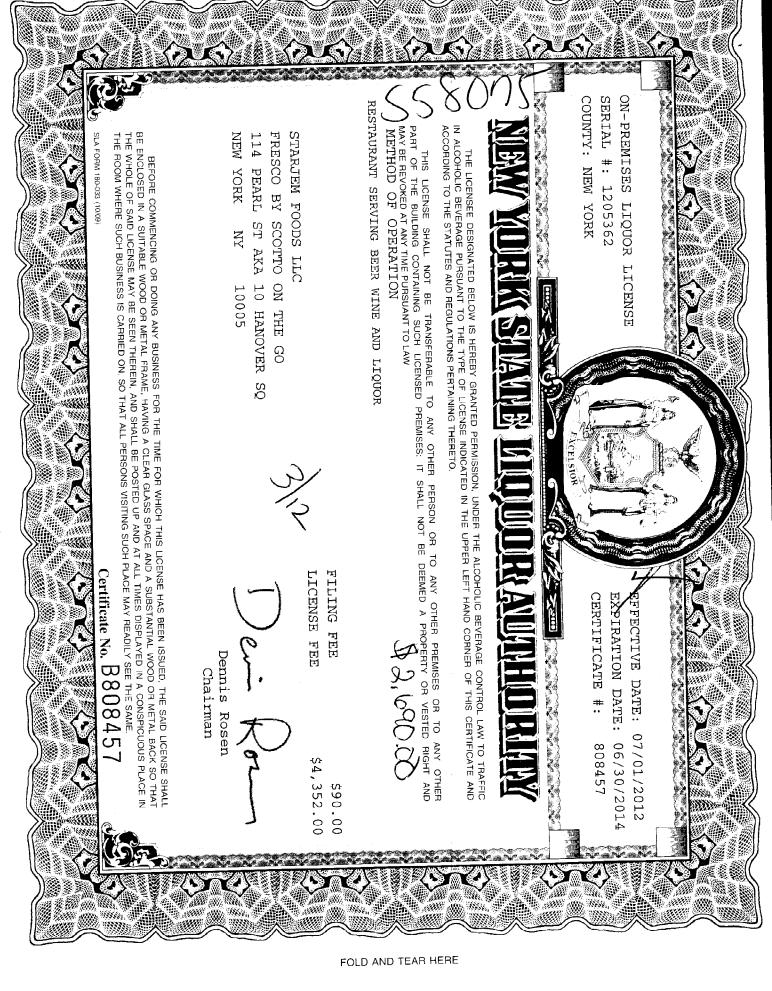
-136

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.

Agency: State Liquor	Authority	Date:	May 7, 2013
Division/Bureau:	enewais		(may 7, 2013
1. Name of individu	al appearing:	Law Office of Bruno V. Gioffre, Jr., F	PLIC
Address:	2900 Westchester	Avenue, Suite 200 - Purchase NY 105	
T-11	914-358-6430		
2. Client represente	d: Family Group	Enterprises Inc.	
Address:	35 Broadway, Brook	klyn NY 11211	
T-1	18-218-9272		
3. Subject of appear		gulatory/Enforcement	Lobbying
4. Acting in capacity Attorney Other (describe	Lobbyist 🦳	Agent	
5. Are you being com If YES, Check F	pensated? 🔀	Yes No	
6. Signature of individ	fual appearing	= fond y	why).
7. Agency official (pri	nt name):		v . <i>V</i>
Signature:			
OBBYIST is a person or organi			·····

*A LOBBYTST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.



STATE OF NEW YORK - LIQUOR AUTHORITY

ATTN: Refund Unit 80 South Swan Street, Suite 900 Albany, NY 12210-8002

If the licensec desires to surrender a license or permit voluntarily for cancellation and refund, if any, before the expiration date, as provided in Section 127 of the Alcoholic

Beverage Control Law, fill in and sign the following petition and send to the State Liquor Authority address listed above., together with the license or permit certificate. Any false statements may subject the licensee or permittee to disciplinary proceedings and void any request for refund. NOTE: No refund is payable unless this form is completed and the Federal Employer Identification Number (FEIN) of the licensed entity has been provided. PETITION FOR SURRENDER OF LICENSE TO THE STATE LIQUOR AUTHORITY: The undersigned individual partnership corporation (CHECK ONE) petitions the Liquor Authority, under provisions of Section 127 of the Alcoholic ____which was issued to Beverage Control Law, to accept voluntary surrender of license (permit) certificate number 1205362 and in support of this petition makes the following statements and answers: Stariem Foods, LLC NO YES or (Name of licensee) Has the licensee or (if a partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders been 1. arrested or indicted or served with a summons for any crime or offense (except traffic infractions or violations of the Administrative Code) in the past 12 months? Has any person other than reported in Question 1 above been arrested or indicted or served with a summons for any crime or 2. offense committed on the licensed premises or which involved the licensed business (except violations of the Administrative Code) in the past 12 months? (If answer to either 1 or 2 above is "Yes", attach an affidavit setting forth in each case the date thereof, crime or offense involved, the name of the defendant and disposition of the case.) The undersigned petitioner further states that the said licensee will, upon the surrender of said license, cease to traffic in alcoholic beverages during the term for which 3. said license was issued and thereafter until a new license shall be issued to said licensee. WHEREFORE, the undersigned petitioner asks that said license be cancelled and a refund made as provided in Section 127 of the Alcoholic Beverage Control Law. Corporations complete both Sections (B) Individual and/or Partnerships complete both Sections (A) (B) If a Corporation, sign here and sign appropriate certification below. (A) Individual licensee and each member of a partnership sign here and sign appropriate certification below. Dated January Name of Corporation Starjem Foods LL By: Elaina Scotto CERTIFICATION TO BE SIGNED AND DATED BY INDIVIDUAL AND EACH MEMBER OF PARTNERSHIP (A) The undersigned each for himself/herself certifies that he/she is the holder of the aforesaid license; that he/she made the foregoing petition; that he/she knows the contents thereof and the statements contained therein, and the same are true of his/her own knowledge. Dated (Present residence address) (Signature) of person(s) signing petition) LICENSIA of CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION (B) certifies that he/she is LLC Manager Elaina Scotto (Title) Corporation which is holder of this license and which made and executed this petition; that he/she signed of the Starjem Foods, LLC his/her name thereto by order of the Board of Directors of said Corporation; that he/she knows the contents thereof and the statements contained therein; and the same are true of his/her own knowledge. Dated of 1150 Fifth Avenue, New York, NY 10128 (Present residence address) (Signature of officer signing petition) FEIN No. 20-8658331 Date of Surrender 1205362 Please specify the address where the refund, if any, is to be mailed : c/o Fresco By Scotto, 34 East 52nd Street, New York, NY 10022

SLA Form 225-008 (01/28/2011)

STARJEM FOODS LLC Fresco By Scotto On The Go 114 Pearl Street a/k/a 10 Hanover Square New York, New York 10005

January 23, 2013

State Liquor Authority Division of Alcoholic Beverage Control 317 Lenox Avenue, 4th Floor New York, New York 10027

Re:

Starjem Foods, LLC

114 Pearl Street a/k/a 10 Hanover Square

New York, New York 10005

Serial # 1205362

Dear Sir/Madam:

I am an LLC Manager of Starjem Foods, LLC (hereinafter, the "Company").

I hereby authorize Allison During to surrender the Company's on-premises liquor license to the SLA with the petition for Surrender of License form which is signed by me. It is the Company's intention to cease operation at the premises permanently due to the severity of damage sustained during Hurricane Sandy. Due to the closing of the business, the liquor license is no longer in use or needed.

Very truly yours,

Starjem Foods, LLC

Elaina Scotto, LLC Manager

BY HAND

Sworn to before me this

23rd day of January 2013

ROBERT V. FERRARI Notary Public, State of New York No. 31-1200140

Qualified in New York County 2015 Commission Expires May 31, 49

ta X. A.	

	OFFICE USE	ONLY	
○ Original	○ Amended	Date	

STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.

Agency: NY State Liqu	or Authority	Date:	March 12, 2013	1 Tue
Division/Bureau:	icensing			
. Name of individu	ıal appearing:	Allison During (Law Office of Rol	pert V. Ferrari)	
Address:	630 Third Avenue,	16th Floor, New York, New York 1	0017	1
Telephone:	(212) 972-7040			
2. Client represent	ed: Starjem Food	ds LLC d/b/a Fresco By Scotto On T	he Go, Serial No. 1205	362
Address:	114 Pearl Street a/	/k/a 10 Hanover Square, New York,	New York 10005	
Telephone:	(212) 635-5000			
-		Regulatory/Enforcement	Lobbying	
Surrendering the ab	pove license with zo		Lobbying	
Surrendering the at 4. Acting in capacit Attorney	ty of: Lobbyist	one 1 office.	Lobbying	
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Surrendering the above the surrendering the above the surrendering the above the surrendering in capacity. Acting in capacity that is a surrendering in capacity. Attorney Other (descriptions)	ty of: Lobbyist	Agent ∠∠∠L ▼ Yes	Lobbying	
Surrendering the above the state of appears of of app	ty of: Lobbyist ibe) Ompensated?	Agent Yes No RY FEE X SALARY	Lobbying	
Surrendering the above the surrendering the above the surrendering the above the surrendering in capacity. Acting in capacity. Attorney Other (descriptions). The surrendering the above the surrendering the above the surrendering the surrendering the surrendering the above the surrendering t	ty of: Lobbyist ibe) Character Compensated? Character Ch	Agent Yes No RY FEE X SALARY	Lobbying	

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.